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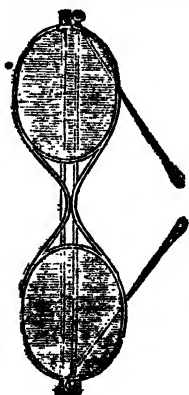
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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
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NEW YEAR.

Once again we extend our annual greetings to our numerous subscribers and readers. The Indian Homeopathic Review is grateful to the homeopathic fraternity as well as to the laity who have always accorded generous help to us in many ways and hopes that the same will be continued in the present year. Our thanks are due also to our contributors through whose exertion the journal has been able to keep up its standard of writings.

Year after year rolls by and homeopathy makes a steady headway in every direction. In the beginning of our career if we counted our supporters and patrons by the dozens, we count them by the hundreds today. Where there were only two or three homeopathic physicians, now we count them by the dozens. There are some charitable dispensaries also. But we regret that there is not a homeopathic hospital in Calcutta yet. We are told by some of our eminent colleagues that we may expect to have our expectations realized this year.

The successful work done by the Calcutta Homeopathic Society last year has been a very satisfactory feature of the year's work. It has met regularly every month and has done much useful work. We expect much from the society this year. A free exchange of views among the members of the profession has a very salutary effect on the development of the resources of the homeopathic system of treatment.

While the memory of the pioneers of homeopathy prompts us to follow in their footsteps, a look at the present generation fills our hearts with the best of hopes and aspirations. In the death of Dr. Leopold Salzer homeopathy has lost one of its biggest pillars. An erudite scholar and a great philosopher Dr. Salzer was one of the pioneers of homeopathy in India.

Once more we wish our readers and subscribers a most prosperous and happy new year.

HOMEOPATHY: WHAT IT IS, AND WHAT IT HAS DONE FOR HUMANITY.*

BY J. P. SUTHERLAND, M. D., Boston, Mass.

There are certain requests which, when made, take on all the force of a command. Such are the requests of royalty for the presence of a subject. Such are the requests in the name of a Cause to which one stands pledged for service to be rendered that Cause. Such a request was received by me,

* This paper was read before the American Institute of Homeopathy, when it was decided to have it published in several different journals as their arrangements might permit. It was voted that the Institute procure 10,000 copies to be distributed to physicians throughout the country. The three following papers by Doctors Laidlaw, Watters and Stevens constitute the Symposium on Immunity which the Institute also voted to give similar distribution.

some months ago, from the distinguished colleague who for this hour stands as the leader and representative of American homeopathy. Our president did me the highly appreciated honor to ask me to speak to-night, to the American Institute of Homeopathy and its friends in the auspicious hour of our assembling for our sixty-third annual session, on *Homeopathy. What It Is, and What It Has Done for Humanity*. I am here to do what in me lies to meet that request ; because from such a source and to such a purpose it came to me virtually as a command.

I greatly appreciate the honor which has been conferred upon me, although I feel the honor imposes a task which would be better executed, a duty which would be better fulfilled by many an other member of the Institute. The difficulties of the task are many, and of no small weight. To offer anything worth the serious consideration of those who are as thoroughly well versed in the principles and history of homeopathy as are the majority of those I see before me, is an endeavor to be faced with sincere humility. My encouragement to face this endeavor lies in the fact that each year brings young recruits to our army who may fail to realize that the comfortably-housed army of occupation which they find homeopathy to be today, was once a brave and slender advance guard, fighting its uncertain way through an enemy's country. To such recruits a half hour spent in glancing at the beginnings of the cause under whose banner they stand enrolled, and striving for a clear formulation of the principles underlying that cause, cannot be wholly mis-spent. Nor, while veterans take happiness in recalling around a friendly camp-fire the campaigns they have shared, can the veterans of homeopathy lose all pleasure in a backward look, over the cause whose support commanded the loyalty of their youth, and whose success is the dearest pride of their ripening years.

Thus I hope for an indulgent kindness of attention from both recruit and veteran as I enter upon my task.

What is Homeopathy ?

The question has been answered a thousand times, both by its friends and its enemies. I think that out of that thousand, the accurate, impartial, demonstrably true definitions have been singularly few. They have varied from its enemies' qualification of it as a rapidly dying charlatanry—and truly like Charles II. it has been an "unconscionable time a-dying ! —to the presentation of it by its heated partisans, as the one and only cure—all of every ill that flesh is heir to ; to depart from which, or to associate which with any other therapeutic resource, were to show one's self a renegade to divinely revealed truth. To-day neither of these extreme definitions has very loud proclamation. Yet both, once loudly proclaimed, had their formative influence on the general thought ; which warring influences may be readily traced even today, in many utterances public and private. It is far from either extreme, the true definition must obviously lie.

The definition of homeopathy should be as simple, as uncompromising, as demonstrable, as incontrovertible, as is the thing defined. Homeopathy is a very safe and sure method of treating sick people. Homeopathy is a method of treating sick people in accordance with the formula "*similia similibus curentur*" :—let likes be treated by likes. It is a definite method, in harmonious accord with a dictum of Nature. The method offers no affront to Nature. It does not assume to coerce Nature ; it studies, and then seeks to work in harmony with certain unvarying natural laws. It is a guiding therapeutic rule ; a principle which within its sphere of action is as constant, certain, and immutable as are Nature's laws everywhere. It does not leave one helplessly waiting for the slow, perilous teaching of accumulated personal

experience ; experience, with its possibilities in the way of mistakes, accidents, and failures so fraught with perils to others ; experience which mounts not only on its dead self to higher things, but too frequently on the dead selves of its trusting friends and patients. Homeopathy is a method of practice. There has been much contention as to whether its guiding rule should read "*similia similibus curentur*" or "*similia similibus curantur*." Whether or not this formula is a statement of a law, or a guiding rule ; whether, if a law, this law be universal and unlimited in its activities ; these things after all, matter little. Whether the phrase be the statement of a law, or of a rule of practice, it is the same unvarying, reliable guide-post to the destination sought by every true physician ; namely, the safe, speedy and permanent restoration to health of those whose health stands in peril.

The law of similars may well be likened to a compass ; a guide over trackless seas, and through untrodden forest depths ; a something to be relied upon in an emergency where experience and precedents are lacking. It is true, but too often forgotten, that the rule *similia similibus curentur* is not restricted to drug giving ; it applies to the use of any influence, mechanical, dietetic, psychic, electrical or otherwise classified, which is capable of disturbing health. Such influences, whatever they may be, can be utilized homeopathically. This is a fascinating field of thought, but time forbids further exploitation of it. It is, as Kipling says, another story.

Let us repeat and fully grasp that homeopathy is, in its simplest definition and in its final analysis, the application in the treatment of the sick of the law of Nature that likes can be cured by likes. Am I brought to pause by the question, possibly prompted by cautious scientific curiosity—"Is

not this rather a daring statement—rather a lofty promise—that your rule of practice is founded on a law of Nature ?” How do we *know* it to be a law of Nature ?” We know it to be such a law, exactly as any scientist knows his working rule to be founded on a law of Nature ; by patient and exact experimentation and by the reiterated exact results obtained. The day is rapidly passing when fair-minded men waste their time in arguing the tenableness of theories. The day has come to stay when theories are adopted or disproved, not in the forum, but in the laboratory. We, who call ourselves homeopaths, have made laboratory and clinical tests of the rule of similars, and our results are on record ; he who runs may read them. Let those who question this rule, question it where it was established, in the laboratory and in the clinic. When they have set their results disproving it, over the results which have established it, then will be ample time for us to take our cause to the forum for controversy. Till that is done, controversy is time badly wasted.

Homeopathy is established from the laboratory. For the application of the simple rule of similars necessitates primarily an intimate and exact knowledge of drug pathogenesis. The sick-making power of drugs, the effects they produce upon healthy human organisms must be known before they can be used intelligently in accordance with any therapeutic principle whatever. Drug pathogenesis must be mastered in the laboratory before drug prescription can be made in the clinic.

It was thought in former times, and is often tacitly taught by many today, that drugs have curative action. It is not sufficiently recognized that their curative action is a secondary and dependent issue. It is easy to show that drugs are primarily sick-making things. Calling them medicines does

not make them curative. It is the very fact that they do have power to disturb normal conditions in healthy people that makes them of possible use in the treatment of people whose normal conditions have by other causes been disturbed. This point is not sufficiently realized. Drugs are the disturbers of the peace of the economy. The question which has always faced our profession has been how to use that disturbing influence in a curative way. We begin by recognition, founded on experiment, that drugs in certain quantities or doses, must and do act, whenever and to whomsoever administered, in practically the same way ; that is, they produce similar effects upon all people. Were it otherwise, drugs would be simply unreliable, unknowable, and highly dangerous agents ; of no therapeutic use under the rule of similars or any other rule.

The proving of drugs, therefore,—the ascertaining by exact, reiterated experiment, just what powers are inherent in each drug, became one of the first obvious duties of the early homeopathsists ; and it remains one of the most important duties of present-day homeopathsists. The absurdity of judging of the action of drugs from the effects produced by the administration of these drugs to sick people, was recognized even before Hahnemann's day, though it still waits its full and final recognition. But until Hahnemann's day no one had insisted that knowledge of the action of drugs could be obtained only by administering drugs to healthy people, and thus by the only rational method mastering their powers and properties. This debt alone, did we owe him nothing else, should make Samuel Hahnemann's name not only to homeopathsists, but to the whole profession of medicine, a toast to be drunk standing.

The sins of the fathers are visited unto the third and fourth generations. The sins, the errors, the ignorances, the

mistaken dogmatic theories of our profession are visited upon our medical children, the laity; unto many generations. Such an ignorance, perilously close to sin, we find in the present-day credulity of the laity concerning drug effects in their purely empirical aspect. Our predecessors in medicine had a like belief in their usefulness; a belief that but very sparsely obtains today among their professional successors; but which among the laity has taken so firm a root that it is well nigh ineradicable. Hence the terrible tenacity of the patent medicine evil. Homeopathy founds itself on the certainty that drugs must act on the same way in illness that they do in health. For while susceptibilities may be quickened or dulled by illness, the body remains essentially the same. A simple experiment will prove the correctness of this view. For instance, a certain quantity of glonoine will produce without much variation, and with great promptness, in a healthy person, a peripheral vasomotor paralysis, with cerebral hyperæmia, and a pulsating throbbing sensation. The same set of symptoms will be produced if the same test of glonoine be administered to a person who is ill; and if he happens to be suffering from a set of symptoms similar to those producible by the drug, these symptoms will be markedly intensified or aggravated. This first, and following it the disappearance alike of the drug symptoms, and of the disease symptoms for which the drug was administered. Here we touch a truth which marches with homeopathy, thought it should never be preached as identical with the truth of homeopathy; namely that of the smallest possible dosage compatible with obtaining results. The earliest experiences in homeopathy revealed the necessity of reducing the dose of a drug to the minimum; and the Small Dose came as a natural result. Thus the Small Dose is a natural corollary to the therapeutic rule of similars. Another

corollary of homeopathy and a most valuable one, is the doctrine of the Single Remedy. Perhaps we have wandered from this truth more generally than from the two preceding ones. There is practically no dissent over the statement that a knowledge of drug pathogenesis is an essential to the intelligent use of drugs. Neither is there much difference in opinion among us, concerning the necessity of reducing the dosage to the minimum, when applying drugs in accordance with the therapeutic law of similars. But in the effort to produce effects quickly, to bring about a cure in a short time, the temptation is great to use more than one drug at a time. That such a practice is illogical to the point of absurdity can be demonstrated without much effort. As homeopaths, we must know that drugs that are closely similar in their action would act as homeopathic antidotes to each other; and drugs that are dissimilar in their action, naturally cannot both be similar to a condition under treatment. This reasoning should put an end, so far as homeopaths are concerned, to those "combination prescriptions" and "combination tablets" whose use in my own belief, is being viewed with too complaisant an eye. The specialist in therapeutics who calls himself a homeopathist, cannot consistently make use of drugs whose action on the healthy body remains unproved. Where are our provings of "combination tablets?" Let the physician employ such if he desires;—but let him not call himself a homeopathic physician while employing them.

The doctrine of individualization is almost as characteristic of homeopathy as any of the principles already enumerated. Briefly stated, it means that individual characteristics are quite as evident in illness as in health; and since all cases of similarly diagnosed illness are not alike, it is therefore necessary to study the peculiar manifestations of the

condition in a given individual, in order to adapt thereto a similarly acting drug. Next to the phrase *similia similibus curentur* there is no other so characteristic of homeopathy as the phrase "totality of symptoms." Probably no phrase has been more misused or abused, or less understood. It means, on the part of the physician, a pathological grasp of a case, as complete as his pathogenetic grasp of its possible remedies should be.

Homeopathy is not a lazy man's method of treating sick people. It is not consistent with empiricism in any of its protean forms. Let me add, though here again I cannot pause to elaborate my statement, that homeopathy is not an exclusive sectarian method of treating the sick. Rational homeopathy does not claim, nor did it ever, nor did its founder ever claim, it is the *only* method of *treating* the sick. We as Homeopaths hold it to be the only direct *cureative* method of employing drugs for the relief of the sick. This belief in no wise limits the resources of the homeopathic physician. Every therapeutic resource outside the ever-narrowing field of drug-administration, belongs quite as much to the homeopathist as to any of his professional brethren ; and, I hasten to say, is by him today as intelligently studied, and as effectively employed. This, then, shall we say, in answer to "What is Homeopathy ?" It is the administration of drugs to the sick, under a scientifically demonstrable law of Nature. It is a mild and mighty system of treating diseased humanity. It is a truth that has been tried out in the fires of enmity, of ridicule, of long, fierce and merciless opposition. Probably only the so-called heresies dealt with by the Spanish Inquisition can justly be compared, in point of suffering and survival of unremitting and relentless persecution, with homeopathy, in what it has suffered and survived, at the hands of traditional medicine. *Sic tensio et vis*, the old axiom of physical science

says, "The stress must mate with the strain." The strength of a given thing may be measured by its power of resistance. Measured by what it has resisted, homeopathy stands among the giants. It is a truth that stands today tested and unshakable in public and private esteem, and in honorable recognition.

What Has Homeopathy Done for Humanity ?

In order even measurably to answer this question one should be familiar with the condition of physic, a century or more ago. I have no time left in which even to outline for you that condition. You yourselves must recall the days in which George Washington was bled to death by the leading physicians of his environment ; when superstition clothed itself as medical learning ; when Nature was never questioned, never trusted, never guided ; but merely bullied, gagged, assassinated ; when the doctrine of a total depravity, to be terrified into submission to blind dogma, reigned alike in the spheres of theology and of medicine. Over this chaos, in the steady hand of that brave old thinker and wise and patient experimenter, Samuel Hahnemann, the lamp of an immutable guiding law of therapeutics, was lifted to shed its mild, far-illuminating ray. That lamp has become a Pharos, lifted by the hand of Hahnemann to the height of the tower of science, whose foundation rests on the rock of basic truth. Its light today shines very clear and very far. We dare not say that lamp was kindled by the hand that lifted it ; for to do so would be to belittle truth to human origins. Hahnemann himself honorably and gladly pointed out that Nature's law of similars had been glimpsed long before his day ; and himself quoted allusions to it from the writings of early medical authorities. But the fact remains, that it is to Samuel Hahnemann the credit is due of not only seeing the truth in question, but testing it, formulating it, practising it, teaching

it, and establishing it, not, I think, easily to be dislodged in the armory wherefrom honest physicians draw their weapons for the age-long battle with human suffering and premature death. We may not venture to say that to the kindled lamp of similia, alone, is due the light by which medicine has groped its way from essential barbarism to humane science. "Many lights Thou hast kindled"—says the Hindu sage :—"By any of them, may we find the Path." Homeopathy may not have been the sole factor in a century's medical reform, but we firmly claim it to have been one factor, and a strong and a beneficent one. These reforms it assuredly and past contradiction has brought about, in the sphere of medicine.

Homeopathy has taught all medical scientists the value of close, exact, and complete observation and analysis of conditions. It ante-dated by many years what are known as modern laboratory methods. For the inexact study of drug pathogenesis is worse than useless ; it is highly dangerous. Very early and notable instances of "original research" were the drug provings made by Hahnemann, who was working in an entirely new field ; not only was the path untrodden, but the trail leading to it had not even been blazed. It was necessary to devise methods whereby to work ; and that under such conditions, his work proved to be as thorough and satisfactory as it did, is so marvellous as almost to silence criticism of its errors. Homeopathy has taught the uselessness of pathological classification in therapeutics. It has taught the incalculable value of climal individualization. Homeopathy has taught the value of individual thought and judgment, and has helped to develop alike insight and reason, by forcing a physician to decide for himself what is useful in drug therapeutics, in every individual instance, instead of slavishly following the dictates of some ever-changing and unauthoritative authority. Homeopathy has taught liberalism

in medicine ; it has blazed a trail for individual research to follow ; it sounded the first note of revolt against the tyranny of tradition in medicine. Before its day Galenical doctrines had governed the profession unchallenged for hundreds of years.

Finally and most proudly of all, to the question "What has Homeopathy Done for Humanity ?" let us give answer: "It has alleviated the sufferings of millions of the sick ; it has saved innumerable human lives, by methods that never once have put a human life in peril." This is no idle boast ; no flight of fancy. It is demonstrable and sober fact. Statistics have proven it, as daily experiences are proving it.

Such, in pathetically inadequate outline only, are my answers to the questions : "What is homeopathy, and what has it done for humanity ?" Over the portal of our near tomorrow we read the question—What is to be the future of homeopathy ? I have not been asked to discuss that question ; nor shall I venture an attempt to do so. But to the pessimism which reads the defeat, the decline, the decay of homeopathy, in those signs of the times which make for reconciliation and rapprochement between homeopathy and traditional medicine, which has been so long, so openly, so savagely and implacably its enemy, I would say : Let us remember that Samuel Hahnemann never desired nor strove to found a sect in medicine. He strove to bring a great, reformatory truth to the knowledge and to the acceptance of the medical profession at large. Had the medicine of his day shown itself willing to investigate his teachings, and to assimilate all that in them was demonstrably true, homeopathy as a segregated sect would never have come into being. Traditional medicine showed itself a very Herod toward the new-born truth ; and the sect of homeopathy perforce formed itself about that truth, to save it from utter obscurity, if not extinction. The

separated sect of homeopathy as such, will have fulfilled its use, when the truths of homeopathy have achieved the world over, explicit and honorable recognition and acceptance at the hands of traditional medicine ; and when Samuel Hahnemann, with all his human fallibilities seen and admitted, shall be assigned by traditional medicine, his true place as a scientific thinker and experimenter, and a benefactor to the cause of medicine. This day has hardly dawned ; yet here and there the watchers on the walls see a lightning in the skies of opposition and misrepresentation that have been for a century so dark, and cry to us who listen : "The morning cometh !" So far as this faint dawn foretells the true morning, in whose light all men shall fearlessly see the truth, and by whose light all men shall fearlessly follow the truth till all division is merged in brotherly co-operation for the healing of mankind, speed that dawn ! For in the day it heralds.

* * * * only the Master shall praise us, and only the Master shall blame—

And no man shall work for money, and no man shall work for fame,—

But each for the joy of the working ; and each in his separate star,

Shall lift his truths, as he sees them, to the God of truths as they are !

—*The New England Medical Gazette.*

INDICATED REMEDY IN SURGICAL CASES.

Some years ago a colleague in this city remarked that the earlier practitioners of homeopathy in this country had ignored the operative procedure in surgery and thereby caused an impression in the minds of people that homeopaths have

no surgery. And that is the reason we don't get many surgical cases.

We pointed out to him then and there that there is a difference between surgical manipulations and treatment of surgical cases. Our pioneers had done both, but so many cases of surgical diseases were cured by their indicated remedies that people have had an idea that manual interference is seldom required. One is purely physical and the other is entirely dynamical in nature, so they should be treated on separate principles.

In our earlier years of practice we had occasion to watch some of these surgical cases treated with the indicated remedies successfully. Some of these cases were so charmingly cured that even our colleagues of the allopathic school who had the opportunity of observing, spoke very highly of our remedies. We know one of our veteran homeopaths had been able to cure a fistula-in-ano after an operation by the best surgeon of the Medical College. That surgeon declared the case to be hopeless and no body ventured to take up that case. Our hero not only undertook the treatment but effected a rapid and permanent cure. That allopathic surgeon took notice of the action of our remedies and when the case was entirely cured, he saw the homeopath and gave him the highest credit.

In another instance we treated a very severe case of iliac abscess. The allopathic surgeon wanted to operate, as he said the pus had formed and there was no other chance but by the knife. We cured the case by the indicated remedies and were fortunate to receive that surgeon's cordial thanks.

Cases of appendicitis have been so successfully managed by the indicated remedies that even our opponents have to acknowledge the curative power of homeopathically selected re-

medies. We are bold to say that during our long practice we have never lost a single case ; very bad cases were given to us after other systems of treatment had failed to do anything and we succeeded in bringing all of them to health. Even recurrent cases are beautifully managed by our indicated remedies.

A tyro in homeopathy knows all about these curative virtues of homeopathic remedies in surgical cases. Cases of tumors for instance are often cured in our hands. We know the case of a young lady who had a very big tumor in the head. Her allopathic friend advised her to use knife to extirpate the growth. She came in our hand and we had been successful in dispersing the tumor by the indicated remedy. *Baryta c.* was the medicine used.

Her surgeon ridiculed the idea of a tumor treated by medicine. When the lady got well, she went and showed her head to her surgical adviser, who politely told her it would recur again. Unfortunately for the doctor this lady is still living about ten years after the cure and no sign of recurrence ever appeared.

We all know the marvellous efficacy of *Arnica* in bruises, contortions and other injuries : *Rhustox* for muscular strain and similar affections, *Calendula* for cuts and incised wounds of all kinds where there is even alarming hemorrhage. It has the wonderful power of arresting hemorrhage from wounds. How quick and charming are the effects of *Hypericum* on wounds affecting the nerves ! We had a case of a gentleman whose arm had been amputated, but he complained of uneasy feeling and excruciating pain in the amputated stump. His surgeon and allopathic advisers tried their best without any benefit. They wanted him to submit to a further operation when he sought our advice and with a few doses of *Hypericum 200* we effected a permanent cure. In another case of a wound in the heel from

a nail driven in there, symptoms of tetanus made its appearance and an allopathic surgeon wanted to operate. We cured the case with *Hypericum* 30.

Warty growths are often got rid of by *Thuja*. Nitric acid, *Arnica* are our trusted friends. *Calcarea*, *Silicea*, *Thuja*, *Sulphur*, *Tuberculin* and some others have wonderfully helped us in curing very obstinate cases of fistula.

How often *Hepar sulphur* has been powerful enough to save so many limbs from the surgeon's hands!

In fracture of bones, after the bones have been put in proper position, how quickly *symphytum* effects union of the broken ends and expedites the cure. In chronic cases of non-union of broken fragments *Calc. c.* and *Calc. phos.* and *Inula* are sufficient for a cure.

In early volumes of this journal we wrote several articles on surgery in homeopathy where we conclusively proved that innumerable cases of surgical ailments were beautifully managed by the administration of indicated homeopathic medicines.

Hahnemann also said that purely physical cases only require surgical interference. If we are faithful prescribers, wonders may be performed by homeopathically chosen medicines.

P. C. MAJUMDAR, M. D.

MENTAL SYMPTOMS ON MENSES.

Very irritable day before menses. *Magnes. mur.*

Irritable and weakminded, does not like to answer questions: *Ammon c.*, cross, everything irritates her, speaking is too much troublesome during menses : *Castor.*

Excitable, easily offended : *Apis.*

Conations. Loquacity during menses : *Lachesis.*

Before menses loud laughing : Hyosc. Weeping mood before menses, Conium. Before and the first day, Lycopod. During menses: Arsen, Zincum. During menses convulsion and piercing screams : Cuprum.

Exaltations. Very excitable, a day before menses : Magnes mur. The least excitement causes return of menses. Calc ost.

Restlessness and anxiety a day before : Sulph.

Depression. Mental and bodily depression with despairing mood, after menses : Alumin.

Rage. Day before or first day raving and weeping as if mad ! Lycopod. Before menses, wild behavior, with sobbing, in bed and without eating : Sepia. Neuralgic pain in teeth and head and beats her head. Arsen.

P. C. MAJUMDAR, M. D.

UTERINE FIBROID (CURED).

P. C. Majumder, M. D.

A relative of mine came to ask me about an unusual thing in his wife's genital organs. His wife is a young lady of 25 summers, mother of three children, all living, of a robust frame of body and calmness of mind. She used to live in a most unhealthy place in Eastern Bengal. The last child was born about three years ago and since then her menstrual function was not regular. It was profuse but regular in time before.

The last labor was rather protracted and very painful, lasting about three days since the beginning of labor pains. After this childbirth her health also gave way.

Menses commenced eight months after child birth. It was profuse, bright red and early. There were no appearances for the next three months, but on the next month it

came on with profuse and gushing discharge which debilitated to the extreme.

Her appetite failed, bowels became irregular, sometimes diarrhoea followed by constipation, loathing food, acid eructations and heart burn, appearance pale and anemic and there was often palpitation of heart. The patient told her husband that there was something unusual with her womb. She felt a heavy and dragging sensation in abdomen and great prostration of body and mind.

This heavy sensation increased gradually and she felt a large mass of solid thing in her abdomen. Advice was sought and a lady doctor pronounced it to be a fibrous tumor in uterus and that there was nothing but an operation to remove it. She came down to Calcutta and consulted me.

I found it a hard resistant body about the size of an orange in the pelvic cavity. Menses stopped for the last seven months. All the symptoms pointed conclusively that it was a Calcareous case. I gave her *Calc c.* 30 one dose every day for a week, and then no medicine for another week. In this way to continue the medicine for one month. •

She came to me again after that time with a cheering report. She improved in health in every respect. Her appetite was better, dragging and heavy sensation less and she was hopeful of her recovery.

I continued this remedy in the same way. Tumor was softer and of smaller size. After two months' treatment menses appeared. It was copious and of bright red color with black clots, and painful.

No medicine for sometime. She wanted to go and I gave her a few powders of *Calc. carb* 200 to be taken one powder a week followed by placebo globules every day.

After a year she came to Calcutta and I had the satisfaction of hearing that she got rid of the growth and her

menstrual functions were regular. She regained her former strength and vigor.

Since that time, it was about five years that she had a healthy and well developed child born without much pain and after-suffering. It can easily be inferred that the cure is complete.

PARALYSIS WITH HICCUP.

An elderly gentleman, thin and of anemic appearance, had an attack of apoplectic fits of a milder nature about three months ago:

The fatal termination was averted by the timely treatment. It was followed by paralytic strokes of face and limbs ; in fact it was a general paralysis.

The patient had piles and suffered off and on from dyspepsia. Bowels generally constipated with accumulation of considerable flatulence. Appetite poor.

When called I found the face turned down, especially the right side. Power of speaking almost gone, jactation of the legs and hands, general painfulness of body. Violent hiccup, tongue badly coated white, no stools for the last four days. Before that enema was to be given for removing fecal accumulations. Nux vom 200, one dose followed by placebo.

In the evening I got the information that hiccup was stopped, other conditions were the same.

Plumbum met 30 morning and evening.

There was considerable improvement for the last four days. The trembling of limbs however was no better.

Cuprum met. 200, one dose, followed by placebo for three days.

Improvement. Continued placebo. Appetite good, tongue clearer and the patient gained strength.

No medicine.

Constipation strong, fecal accumulation great with distention of abdomen with gas. Lycopod 200. Enema was given in the morning and a large quantity of very hard fecal matter came out.

Improving. Placebo.

There was again trembling of both feet and legs more in the right. Zincum met 30 morning and evening.

Improvement perceptible. The medicine continued once in the morning only. The patient improved a good deal and in a month's time was perfectly cured.

P. C. MAJUMDER, M. D.

ACONITUM NAP.

By E. B. Nash, M. D., Port Dickinson, New York.

FEAR. *General fearfulness ; fears approaching death which she predicts. Fears to go into a crowd ; or into the streets. Fears many things, but is fearful of death the most of anything.*

This is the leading characteristic of this remedy. Too great stress cannot be placed upon it as a guide in prescribing.

In regard to other remedies having the symptoms of fear, Arsenic. alb. comes the nearest, perhaps, to Aconite of any other remedy. And it has anguish and restlessness equally ; but Aconite fear takes place in the beginning of acute inflammatory affections and before organic changes have occurred, while Arsenic comes later, and after, or when such changes are present. The Aconite patient is sure death is imminent, right at hand, while Arsenic is sure of impending death from his disease, from which he can never recover. Aconite is on the move with more than usual activity, throwing himself about, while Arsenic is just as restless, but cannot move so freely on account of too *great prostration*. Aconite has no great changes, as of decomposition of blood, while Arsenic has it very positively ; and, also in many instances, even malignant

degeneration. So it is not very easy to confound these two remedies, or necessity for alternation, or combination of them. Other remedies have fear, but not as general fear as these two. For instance, Argent. nit has fear when getting ready to go to the opera. This fear brings on diarrhœa, also fears being in narrow place, as if the houses would fall together on him. Gelsem. has a fear of appearing in public places similar to Argent nit., also fears his heart will stop beating if he ceases to keep moving.

Digitalis, according to Hale, has the opposite, viz., the patient fears he will die if he moves, and as found recorded in "Guiding Symptoms." The least muscular exertion renders the heart active, labored and intermittent. Korndorfer, in an article in "Pennsylvania State Transactions," says (basing his conclusions on Hahnemann's *Materia Medica Pura*), in reviewing the recorded symptoms (of Digitalis), one of the most characteristic symptoms is found in the pulse. Where the remedy is indicated in Homeopathy, we will find a decidedly *slow pulse*, but qualified by the modality, "marked acceleration of the usually slow pulse on the slightest exertion, such as walking even slowly, or when rising from a recumbent or sitting posture." He adds that "This modality is so characteristic that if it be not present in a given cardiac case, Digitalis may almost surely be ruled out." Now Gelsem. has marked acceleration of the slow pulse on the slightest muscular exertion, but it is more dependent on the general weakness or prostration of nervous origin than upon any heart lesion, so common with Digitalis. "Digitalis springs up in affright, gasping for breath on falling asleep" This comes as a consequence of the slowing, in fact, almost entire stopping of the heart's action in the act of going off to sleep (*Grindelia* and *Lach.*) Much more could be said in explanation of the action of this heart remedy, but it is safe to set Digitalis down among the remedies showing *fear, or fear of death* feature prominent.

Psorinum is in despair of recovery, thinks he is very ill and will not survive the sickness, and is especially useful if this fearful helplessness remains after a violent acute disease, with great debility and perspiration at night on the least motion.

Other remedies have the fear element appearing in certain directions in conjunction with special ailments, such as Cimicifuga and Platina, in uterine affections ; Arsenic and Rhus fears the dark ; so also Stramonium, must have his hands held, etc. ; Borax and Gelsem., fear of falling ; Bell., Hyosc. and Stram. have delirious fear of animals, ghosts, etc. ; Calcarca, Cann. Ind. and Cimic., fears being insane ; Nat. carb. and Phos., fears thunderstorms ; Stram. and Lyssin., fears water. But for all pervading fearfulness Aconite probably leads all the remedies so far known.

Again, the effects of fright, acute or chronic, are often met by Aconite, and here we must remember such remedies as Ignatia, Opium, Coffea, Gelsem., etc.

2d (Leader).

Anguish and restlessness. Hering put it in his original *Materia Medica Cards*—*Excessive restlessness and agonized tossing about for hours.* It could not be much better expressed. Like the fear which we have described, this condition is found in the first stage of inflammatory affections, though it may exceptionally appear during the course of sub-acute affections and in such cases a dose of Aconite may be interpolated with great advantage. Here, again, Arsenicum comes out prominently for comparison, for it has anguish as well as restlessness in a fully equal degree. In my "Leaders in Homeopathic Therapeutics," I placed in trio Aconite, Arsenicum and Rhus tox, and so far as restlessness is concerned they belong there, but the anguish or as Cowperthwaite aptly terms it—the "Mental Distress," is not prominent under the Rhus tox., for the patient may here be more or less indifferent, even so beclouded in the mind and sensations as to be actually indifferent as to whether he lives or dies. If we consider anxiety as a form of anguish of lesser degree, and that may become so intense as to become anguish, the case may become different and we find a number of remedies having *anxiety* and *restlessness*, such as Aconite, Arsenicum, Aurum, Beladonna, Canth, Pulsatilla, Rhus tox. and Sulphur in strong type, according to Kent and others.

3rd (Leader).

PAIN must be considered as belonging to Aconite as a

characteristic. The *pains* are *intolerable* and *drive* him to *desperation* with *loud cries* and *lamentations*. Like Chamomilla and Coffea, they seem unendurable and are often wonderfully met and relieved by one or the other of these three remedies. The subject of pain in disease is of paramount importance to the homeopathic physician and guides to the choice of the curative, where the pathological hobby rider is helpless. Too high estimate cannot be placed upon it and this is one of the strong points of excellence in Kent's Repertory. Of course all remedies have pain somewhere in their pathogenesis, but some have the alternate *painlessness* in marked degree, at times, such as Opium, Stramonium and other narcotics. Not only pain but especially the kind of pain, and by what aggravated and relieved, is of great importance. Instance, the burning stinging pains of Apis mel. > by cold, the burning pains of Arsenicum < by heat ; or the concomitants, such as the sweating with the pains of Chamomilla, with anger ; the chilliness with the pains of Pulsatilla ; the fainting with the pains of Hepar sul., etc. These are only a few of the many instances of characteristic indications, which guide to the choice of similimum in prescribing. We cannot stop to enumerate all here, but Aconite has another condition which is equally characteristic with that of pain.

4th (Leader).

Numbness and Tingling.

This may occur in the left side, tongue, lips, spine, left arm and fingers. If you want to test this, chew fine a leaf of the "Monk's Hood" and you will probably be satisfied within twenty minutes. I have. This numbness and tingling may alternate with the pains or may even accompany them. Chamomilla is very like Aconite in this particular. Also Naphalium. Other remedies having this symptom prominently : *Externally*, Berberis, Cocculus, Graphites, Hyoscyam., Lycopodium, Oleander, Opium, Phosphorus, Plumbum, Secale and Stramonium. *Internally*, Gelsem and Platina.

Suffering parts, Chmomilla, Gnaphalin, Platina, Plumb., and Pulsatilla. None have it stronger in general than Aconite.

5th (Leader).

Location: Heart and Respiratory Organs.

Location, Sensation Modalities and Concomitants were the heads under which some of the old masters worked, in their hunt after the Similimum. It is a good plan to follow now in doing repertorial work. While location alone would come far short of enabling us to select the curatives, yet it is very true that many remedies centre their action in certain organs, such as Belladonna upon the head, Cantharis upon the urinary organs, and Sepia upon the sexual organs of the female. This is a beginning and introduces a class of remedies from which to choose. Then the choice of one of the class must be made from the kind of action with all its bearings as to sensation, modality, concomitant and pathological changes that are manifest in each individual case.

Aconite centers its action most positively in the region of the heart and respiratory organs. No remedy more excites or depresses the circulatory system. Aconite for accelerated circulation, such as is generally present during the first stages of high grade inflammatory affections, and especially when located in the respiratory organs so contiguous to the heart. Of course such inflammatory affections are not confined to these organs, but a general affection like inflammatory rheumatism may call for its employment to the exclusion of all other remedies, but even here the quick pulse and rapid breathing will be prominent. Indeed the *mental distress* upon which we have put so much stress is almost always in connection more or less with heart and circulatory disturbances.

6th (Leader).

Chill, fever and sweat.

All schools acknowledge the importance of this part of our subject. Not many serious complaints either acute or chronic but have indications more or less pronounced under one or all of these heads. Chas. J. Hempel, of old "dubbed" Aconite, the "backbone of homeopathy," because it was so generally (as he supposed) the remedy with which to begin the treatment of most diseases

having high grade inflammatory fever present, so he placed great reliance upon his concentrated tincture of Aconite, and became a routinist in regard to this remedy. Now while we would not estimate lightly this property of Aconite, we would most earnestly protest against its use simply for inflammatory fevers. Other remedies have just as positively a place in inflammatory diseases even in their first stage. Let us look for a memento at one of them, namely, Belladonna. Aconite and Belladonna are so much alike in their general inflammatory action that most physicians (and laymen through their teaching and example) alternate them in the beginning. This and other instances of alternation and rotation have led to the senseless, unhomeopathic and unscientific combination tablets now used and on the market to the detriment of both the physician and laymen. How shall we choose between them? No one making a pretence to an understanding of these so well proven remedies should ask such a question. It is evidence of inexcusable ignorance.

While acknowledging the similarity, let us examine the diagnostic differences.

Aconite has dry heat, not much sweat; Bell., equally hot surface, but sweat in covered parts; Aconite, tosses about in agony with fear of death; Bell., often has semi-stupor, with jerks and twitches in sleep; Aconite, distress in larynx, chest and heart; Bell., centres in brain, with throbbing carotids, etc.; Aconite, great fear of death without much delirium; Bell., very delirious with fears of imaginary things; Aconite, the pains are tearing, cutting, driving to desperation; Bell., beating, throbbing, paroxysmal, coming and going suddenly; Aconite, < evening till midnight; Bell., < 3 P. M. and A. M.; Aconite wants to be uncovered; Bell. wants covering though sweating under it; Aconite, face red; turns pale on rising; Bell., alternately red and purple, or pale (upper lip thick and swollen).

There are others, but even with these which are more or less present in every case calling for either of these remedies, I cannot see any great difficulty in differentiation. Some may object that

Aconite when administered for curative purposes perspires, and so it does, but that is evidence of a restoration of a disturbed health equilibrium and is remedial and not pathogenetic.

Now we will mention under this head that Aconite is the leading remedy for the effects of chill from exposure to dry cold air which is followed by the reactionary inflammatory conditions above described, and finally.

7th (Leader).

THE MODALITIES. We have already mentioned the cause—exposure to cold dry air, and will add by way of putting them all together—checked perspiration, fright; operation.

The diseases most common after these causes are croup, pneumonia, pleurisy, rheumatism, jaundice, suppressed menses, etc. *Aggravation*, evening and night, warmth, covering, rising, lying on offended side; *Amelioration*, open air, assurance, encouragement.

To recapitulate, under seven heads we have: 1st. Fear; fright, and effects of it. 2d, Anguish and restlessness with agonized tossing about. 3d. Pain; tearing, cutting, driving to desperation. 4th. Numbness and tingling; left side, tongue, lips, spine, etc. 5th. Heart and respiratory organs (location). 6th. Chill, fever and sweat (especially synochial fever). 7th. Modalities, causes (exposure to dry, cold air or checked perspiration; fright; operations. < evening and night, warmth, covering and rising. > open air, assurance and encouragement.

Around these seven revolve the whole pathogenesis of this remedy. It will be noticed that of the seven, five are subjective symptoms, and two might be properly classed as objective. I mention this because by some there has been a disposition to estimate the objective more highly than the subjective symptoms. I see no reason for rejecting or underestimating either. They all belong to us as prescribers, and we may profit by all, and a disposition to reject any must be born of prejudice and will most invariably stand in the way of a successful search after the *similimum*.

It is not to be expected that this selection of seven symptoms under this or any other polychrest would cover all the possibilities of the drug ; but might be retained in the memory so that the final choice might be facilitated, and an early start in the right direction is an advantage not to be ignored.

—*The Homeopathic Recorder.*

MERCURY AND ITS PREPARATIONS IN DISEASES OF THE EYE.

(*Continued from page 351 No. 11 Vol. XVI.*)

I. CONJUNCTIVITIS BLENORRHŒA.

In this disease Kafka administers Mercur. sol. 3 (or Hepar sulph 3) with rapid effect, when the eyes are œdematous ; the pain burning ; when the purulent secretion runs copiously and escoriates the canthi and surrounding parts.

Baehr says : "The similitude of the affection of the conjunctiva with syphilitic gonorrhœa, and even the possibility of infection from the latter, permit the conclusion that there is no more appropriate remedy for this disease than mercury. The question is which form of this remedy is to be preferred, and we do not hesitate to declare in favor of the strongest mercurial preparations, such as *red or white precipitate*, but more particularly *corrosive-sublimate*. The latter has the advantage of allowing of easy local application, which should never be neglected in view of so much danger to the power of vision."

For this purpose Baehr recommends a solution of several grains of the second trituration in distilled water. In *Ophthalmia neonatorum* Baehr considers "mercury as the principal remedy, particularly when infection on the part

of the mother can be discovered." In chronic blenorrhœa of the conjunctiva and in the first stage of that disease (before infiltration and excrescence of the conjunctiva are noticeable), mercury is the remedy principally indicated.

When Hughes recommends mercury in chronic ophthalmia with granulation, we shall not err if we apply this to the second stage of chronic blenorrhœa.

Guernsey's indications for mercurius in ophthalmia neonatorum have been already mentioned under the head of conjunctivitis.

When Aconite has modified the inflammation without restoring the discharge, Jahr recommends corrosive sublimate (or Pulsat). If mercury fails to cure the remnants thereof remaining after the subsidence of actual danger, Nitric acid is the remedy.

Fruelfft recommends Cinnabar when there are condylomatous growths upon the iris, or edge of pupil (iritis), or on the edges of the lids, and when the course of the disease and the symptoms creates a suspicion regarding syctic complication. Corrosive sublimate is indicated in exudation.

Gerhardt mentions mercury among the remedies for blenorrhœa ophthalmia without other specification.

Payr recommends red-precipitate after or with Aconite in the beginning of the acute, and in chronic blenorrhœa when irritability is still severe, and croupous exudation very conspicuous.

Gerson recommends Calomel.

Goullon calls red precipitate a specific in ophthalmia-neonatorum.

Fuelfft says that when ophthalmia neonatorum results from leucorrhœa of the mother (the condition we have particularly in mind), he prescribes Mercur. sol. when the discharge is watery ; when accompanied by diarrhœa of green stools ;

excoriation of anus and genitals. Under the same conditions *corrosive sublimate* is preferable to Mercur. sol., when the secretion is excoriating and causes soreness of the facial integuments. According to Fuelfft's experience corrosive sublimate is the principal remedy in this disease. It is obvious that in a disease of such severity and frequently terminating in blindness, speedy relief is of the utmost importance, and we may be easily convinced by experience that Mercur. sol. acts too slowly in cases of this kind. We should, therefore, search for mercurial preparations which act rapidly and specifically upon the conjunctiva, and we may regard *corrosive sublimate* as a medicine of this kind. In many recorded cases of poisoning by this medicine there are but few symptoms of rare occurrence which have a bearing on the conjunctiva.

It is generally speaking the most active mercurial preparation, from which, however, we should not conclude that it is the most potent mercurial in relation to the eye in general (though iritis seems to be most commonly produced by corrosive sublimate). It is on the contrary, to be assumed that since it acts prominently upon vital organs, the eye experiences the least share of its power. In the small number of cases of poisoning by *red precipitate*, we discover symptoms distinctly pointing to blenorrhœa of the eyes, on which account we unhesitatingly give our preference to this medicine.

P. BISWAS.

OBITUARY.

LEOPOLD SALZER, M. D.

By the death of Dr. Salzer, the city of Calcutta, nay the whole of India has lost one of the champions of the cause of homeopathy. Though not an Indian by birth, Dr. Salzer had so long been so intimately connected with us that we considered him as one of our own men and in our lives there

are so many things gratefully remembered that his loss seems to be a personal loss. We are indebted to him and to his good wife for many kindnesses shown to us in times of need. An erudite scholar, a profound philosopher, a great religious thinker and a kind-hearted and generous physician was Dr. Salzer. His knowledge of the homoeopathic *Materia Medica* was unexcelled. He was known to us for upwards of forty years.

He has left behind him his wife and a daughter for whom we all feel very keenly.

We quote below some of the Calcutta papers which shows in what high respects Dr. Salzer was held by the people of the country.

"We are sincerely sorry to record the death of Dr. L. Salzer, well known as a homoeopathic physician. Dr. Salzer had received his medical education in Germany, and had settled in this country for so many years that he may be said to have made India his home. He was a man of rare ability and learning as a homoeopath, and he would have made his mark in Germany or England, but he was much too independent a man in politics to feel happy in the despotic regime of his fatherland, and the climate of England did not suit his asthmatic constitution. He seemed to retain his full intellectual powers even up to his last days, and the entire *materia medica* seemed to be stored up in his memory. He made his choice of medicines with unerring precision. He had not as large a practice as he deserved, and he used his time in careful, assiduous study. The homoeopathic practitioners of this town have never been a happy family, and jealousy and opposition were from time to time directed against Dr. Salzer. But he was always ready to forgive and forget; he helped many of his brethren; and never did he consent to do anything professionally mean or dishonorable, however pressing his circumstances. In fact he showed to his friends and patients a generosity by no means common in this country. Shabby treatment he never gave anybody, but received from some. Dr. Salzer was, however, no mere doctor. He was an eager student of many sciences, particularly physics and biology, and, with the true spirit of a German, was deeply interested in philosophy. He was a man of original powers of thinking, and wrote several essays which bear testimony to the keenness of his insight. On medical subjects proper he wrote a tract on Periodic Drug

Disorders, an admirable thing in its way. In matters of faith he was known at one time as a leading theosophist, but his theosophy was allied to Buddhism, and he was provoked by the application of it to the defence of Hindu idolatry. He had also lost his reverence for Madame Blavadtsky. He loved journalism and patronized many newspapers, English and especially Indian. Most of these papers he had no time to look into, but he took them in only to encourage them. He had a great respect for English character and English institutions, and used to say that the cultivated and religious English gentleman was the finest specimen of humanity. He was, as all his friends know, himself all that a cultivated and religious English gentleman should be.

— *Indian Nation.*

HIS friends and many admirers will learn with deep sorrow the death of LEOPOLD SALZER. After a long decline, borne with patience and fortitude, he passed to his rest yesterday leaving behind him the memory of one who in good fortune, in ill fortune, in his work and in his lighter moments presented to his fellows the constant example of a God-illuminated man. This is not the place to write the story of his life. Passing his days in such seclusion as is permitted to a busy physician, it was the privilege of but a few to know him as he was. And these would not now withdraw the veil behind which he wrought for his fellows. To a larger circle he was known as one whose insight into the profounder mysteries of his craft was matched only by the extraordinary range of his acquirements. There was not a branch of philosophy whose depths he had not plumbed; not a problem in the experimental sciences that he had not pondered. Nor were the moral qualities he possessed less shining than his intellectual gifts, untiring charity of heart and hand, a compassion that no ingratitude could lessen or wear out, and a cheerfulness that is among the first of Christian duties. If ever a man earned the title of the "beloved physician" it was this ripe and tender soul. He has passed on, but of him we feel

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Smell sweet and blossom in the dust.

None knew him who were not the better for his friendship, who were not strengthened and guided in their search for the perfect way by his counsel and conduct.— *The Statesman.*

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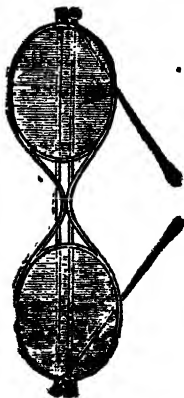
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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
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Vol. XVII.] FEBRUARY 15, 1908. [No. 2

REACTION IN CHOLERA.

The homeopathic system of treatment has been so eminently successful in cholera, that now-a-days people have resorted to it almost in every case. Naturally then in Calcutta which is the metropolis of India and which is situated right in the delta of the Ganges the original home of the malady the demand for homeopathic physicians have been great. In cholera it was generally thought formerly that no sooner the urinary secretion is re-established the patient is all right. Right here so many of our physicians have erred that I think it is our duty to warn all physicians not to be over sanguine in this matter. Lately I have had occasion to treat two or three cases, where the patient died even after the urinary secretion has been well established and the patient was considered to be well on the road towards recovery.

The stage of reaction is a most critical period in the course of cholera and unless the reaction is well established, all may go in vain. But so long as we have such a positive therapeutic guide, our resources are unlimited and our efforts will more frequently be crowned with success, if we only

would study our cases carefully and select our remedies accordingly. We are not like our brethren of the other school groving in the dark for a sure cure. With proper hygiene and careful nursing, we will always manage our cases well if we will only stick to our law of similars.

"No matter what the underlying causes of disease may be, collapse and reaction will always remain the expression of antagonistic nervous states governing the road between recovery and death. Besides the well-known cardiac stimulants, enemas and intra-venous infusions of normal salt solutions, homeopathy counts with the indicated remedy, which according to our law of cure, not once, but thousands of times, has aroused the reactionary forces of the system and re-established the necessary vital equilibrium for a successful issue."

J. N. M.

MIRACULOUS CURES.

We have read of the Talisman by which Richard Cowdell was miraculously cured by Seladin. Such miracles are not things of the past. They are still in our midst.

Late Babu Raj Krishna Ray Choudhuri the retired Dy. Inspector of schools, who made Homeopathy his life-long study and at whose feet we learnt the A. B. C. D. of the true healing art, sent me one day to see a female relative of his who was then confined. After a tedious labour she gave birth to a still-born child, and her placenta was retained for 7 days. It having baffled all available medical aid, manipulative measures were resorted to without any effect. On enquiry I found that she had labour pains for 3 days after which the child was born. I diagnosed muscular paralysis of the uterus to be the cause of the retention and found a case reported in Hales

new remedies to be very similar and gave her Gelsemium IX, and to our amazement the placenta was expelled after the 4th dose. Since then I have prescribed this medicine with success in difficult labour which manifested symptoms of muscular paralysis.

A young gentleman was suffering from catarrh and all available medical aid having failed to cure him he came to this city for treatment. I saw him a day before the date fixed for his sojourn ; and at first sight bloatedness of his face suggested Phosphorus which I gave him in the 200th potency. He took one dose in the night and next morning he came to tell me that he had no cough in the night and he felt much better. I gave him another dose that day and a third on the next. He was perfectly cured and his programme was changed.

A gentleman a retired servant of Babu D. N. Tagore's estate was suffering from asthma since the last 30 years. All allopathic and kabiraji medicines having failed as a last resort he betook himself to opium eating and tobacco chewing—which he said palliated his suffering.

While he was in his service he was one day wading through a marsh on an elephant by night when the animal took fright at a tiger-growl close by and he was thrown off his gadi and was almost buried in mud all night through. He was picked up in the morning a paralysed man which resulted in rheumatism. This malady ultimately made room for asthma. This fact suggested Rhus tox which I gave him in the 200th potency and strange to say he has had no attack since then these 12 months.

BIPIN BEHARY BISWAS.

BERI-BERI (BERRY-BERRY).

Our first attention was drawn to this dangerous disease in the Periodic Drug Disorders by our late lamented Dr. L. Salzer, M. D. In the chapter of Periodic Drug Fevers, he says that the following symptoms of Sepia give us a fair picture of Berry-Berry a disease common in various parts of India, study in connection with Sepia, Dulcamara. Kali nitr, Natrum Hypochloros, Tarentula and (according to Hering) Nux mosch. He extracts from Dr. Allen's Encyclopædia of Pure Materia Medica, following symptoms of Sepia :—

"Swelling of the whole body, face, abdomen, legs and the arms down to the wrist joints without thirst, but with great shortness of breath lasting three weeks, fever every second or third day, chill and heat alternating, coming on at regular hours, even at night, the heat accompanied with sweat all over."

Our first and important duty is to find out the most appropriate remedy for the disease. Will that appropriate remedy emphatically cure our patient ? No, if he be a psoric subject. In our practice we see some patient get speedy recovery, some linger and some die for other additional complaints notwithstanding the most proper drugs administered. Whence the anomaly, we shall show by citing some sections from the Organon of the Art of Healing. Try to get mastery over Sections of the Organon. It states that application of Homœopathic principles appear easy but in reality most difficult and irksome, it demands most careful thought and utmost patience, but these find their rewards in speedy and premanent recovery of the patient.

We are going to give the following sections to treat Beri-Beri, bubonic plague, cholera, small pox and other epidemic, endemic and sporadic diseases or call them by any other names.

"Sec. 5th. The Physician in curing derives assistance from the knowledge of facts concerning the most probable cause of acute disease, as well as from the most significant points in the entire history of a case of *chronic disease*; aided by such knowledge he is enabled to discover the primary cause of the latter dependent mostly on a chronic miasm. In connection with this, the bodily constitution of a patient (particularly if he has a *chronic disease*), the character of his mind and temperament, his occupation, his mode of living and habits, his social and domestic relations, his age and sexual functions, etc., are to be taken into consideration.

Sec. 100. In the exploration of the totality of symptoms of epidemic and sporadic diseases, it is a matter of no importance whether or not anything of a similar kind or name, ever occurred before. Neither the novelty, nor the peculiarity of such an epidemic makes any difference in the manner of its examination or cure; because, under all circumstances, the physician should presuppose the true image of the prevalent disease to be new and unknown; he should, therefore, investigate it anew and thoroughly by itself if he claims to be a master of the Art of Healing, who neither allows conjectures to stand in the place of actual perceptions, nor ever presumes to know the particulars of a case of disease entrusted to him, without previous careful enquiry concerning all of its manifestations. This is particularly applicable to every prevailing epidemic, which is in many respects a phenomenon of peculiar kind, that will be found on careful examination, to differ much from all previous epidemics to which specific names are erroneously applied excepting, however, the epidemics engendered by an unvarying contagion, such as small-pox, measles, etc.

Sec. 101. It is possible that a physician meeting with

the first case of a certain epidemic, should fail to perceive at once its perfect image, because every collective disease of this kind, will not manifest the totality of its symptoms and character, until several cases have been carefully observed. But after having observed one or two cases of this kind, a physician accustomed to exact observation, may approach the true condition of the epidemic so closely, that he is enabled to construe a characteristic image of the same, and even to discover the appropriate homœopathic remedy.

Sec 103. The method of investigating acute, epidemic diseases, was also employed by me in the examination of the *unvarying miasmatic, chronic diseases, particularly in the study of psora*. These diseases required much greater care and diligence than had hitherto been devoted to them, in order to discover the whole range of their symptoms. In these cases, also, one patient presents only a portion of these symptoms, while a second and a third, etc, exhibits still other sets, which constitute, as it were, but a detached fragment of the totality of symptoms belonging to the entire *chronic disease*. A complex like this, particularly *that of psora*, could only be ascertained by examining *a great many chronic cases*. Without a complete image construed out of the totality of these symptoms, it would be *impossible* to discover the medicines (*particularly the anti-psorics*) for the homœopathic cure of the entire disease; but having done so, the medicines prove to be the true remedies for individual cases of *chronic evils* of this kind."

Why does our great master give much stress on antipsorics for epidemic and sporadic diseases? Almost all of the patients being the psoric subjects and because the psora is the cause to overcome first and their actions are of long duration.

Suppose we are going to treat a syphilitic patient who is infected with itch virus. Our patient gets a fall which

breaks the skin, should we here prescribe Arnica for a fall or Calendula for lacerated wound ? No, it will turn into an itch. Hence a well selected antipsoric like Sulphur which Mr. Nash calls as the king of the antipsorics, is required first. Then the evil consequence of the fall may be removed by a dose of Argica, if necessary. If we give, say, mercury first for syphilis, our patient must not be cured by the drug, though it is specific for the disease. First we are to administer a few doses of best selected antipsorics and then to give a dose or two of antisymphilitics, or give the remedies from both the classes, in alternation (vide sec 232. of the Organon).

But to turn to treat Beri-Beri patients we shall speak in our next, together with remedies with their characteristic symptoms.

(*To be continued.*)

NILAMBAR HUI.

Serajunge

(Pabna.)

CONSTIPATION.

No disease in the list of maladies gives the doctor and his patient more trouble than constipation. It is often styled as a simple trouble but to my mind, it stands among the most obstinate ones, and the only explanation that can be put forth in favour of alloting such a mild epithet to our bitter enemies that it does not immediately hazard human life, or take it away without giving a chance to treatment. The form constipation no doubt is a very general one and we can place numerous different afflictions—different from etiological, pathological and symptomatic points of view—under this category ; and as such, I might at once divide this

into primary and secondary ; again according to the duration we can divide it into temporary and habitual forms.

Etiology :—No factor is more important in treating constipation as its cause, and although like in every other disease we are taught to pay attention to the etiology, we must add special caution in this case, for often we find in these cases a dearth of many symptoms or find too general symptoms, that are common to many remedies. Subjective symptoms in these cases are pretty hard to be obtained specially if your patient is one of our pardanashin ladies, and truly much weight lies on these observations.

Therefore we must go way back to the history of the case, when it started, how it started, in the primary form, the age, sex, the habit, and surroundings of the patient are important factors, as the nature of the previous disease, its duration, and kind of treatment taken recourse to, are in the secondary. It will not be out of place here to state that many of the most obstinate cases of constipation we have to treat are the results of (1) *imprudent drugging*. (2) *Diet* is another important etiological factor in constipation and is perhaps second to no other in its capacity. Error in dietetics makes a certain country more infested with this trouble than another and a certain section of people more liable to it than their fellows. Spices, sauces, hot dishes are good instruments for its manufacture ; an excess of meal is another factor in diet that helps the development of this trouble. Here of course I do not include individual susceptibilities, or the local effects of stations, as men who always get diarrhoea after a meat diet, or dysentery on the introduction of the least amount of spices in the dinner, or as some people always get constipated in a certain place. In this latter case if we notice closely we find mostly the water of the place at fault, containing perhaps minerals that are favourable for its development. Periodical

constipation is not infrequently met with in our daily practice, and to lay down the cause why an individual suffers from constipation only during a fixed few months or days of the year is no doubt very difficult, and the only explanation outside of the habit or mode of living of the individual lies in the individual *constitution*, in some latent discrasia, rendering the secretions scanty and the bowels constipated. The next form—the habitual form of constipation depends, when the immediate or accessory causes are removed or explained for, entirely on constitutional discrasia, both hereditary and acquired. Here again comes the importance of paying special attention to the history of the case. You would often find difficulty in finding out whether the father, mother or the grand parents of your patient suffered from constipation. Nine chances out of ten you will not get to know it at all, for your patient very likely will not know it himself. Often again you will feel delicacy in asking so far back into family history for a *simple* trouble like this, but remember please, this is *not a simple* trouble and do not hesitate to try and find out as many facts about your case as you can, even though your patient may think that you are fussing too much over a simple matter. Weakness of the abdominal walls is often liable for the constipation we find frequently in the obese or the costiveness in females after repeated pregnancies. Now before we pass on to other particulars about this malady I must not forget to mention about another form of constipation and by far the most obstinate form, namely the *spasmodic form*. This is an immediate result of a contracted state of the bowels resulting either as a sequence of an attack of chronic dysentery or ulcerative colitis, or seen along with an attack of hysteria and neurasthenia.

Symptoms :—As I have already confessed, symptoms are

the factors that trouble me most in treating a case of constipation *per se*. We have too general symptoms—headache, loss of appetite, furred tongue and often you may not find even these landmarks and your patient would apparently enjoy as good a health as any other man in town though suffering from the most persistent constipation for weeks or even months. Many troubles are heralded often without any appreciable cause that have their origin in a persistent accumulation of fecal matter in the intestines ; piles, colitis, distention of the colon, even ulceration and perforation of the intestines may develop imperceptibly while suffering from obstinate constipation. Some are even of opinion that chlorosis is a result of the absorption of these pent up noxious substances. There is so much however to be learnt on this subject that it behoves me to listen to the discussions of my learned colleagues without taking up much more of your time. Before taking my seat I have two more points in view—first constipation in children and the new born ; second, treatment of constipation in general. The former I think should form the subject of another paper in itself, which I think some of my learned friends will kindly undertake to enlighten us upon, and for the second grant me but a few moments more, for I do not mean to go into details of medicinal treatment but will satisfy myself with a few remarks about the accessory measures, and though some are ready to jump on me at this word and charge me for high treason. I nevertheless cannot, but urge that they are, and have been to me of very great use, nay more so at times than medicine. Much can be done by regulating the diet and mode of living. Vegetable diet is ideal. Massage of the abdominal muscles help a great deal. Another practice much seen among the lay people is the taking of a cup of hot water at bedtime and cold on rising from bed. This practice is at times of immense

value. Before concluding I must mention the ordinary accessory measure, namely using injection. A small injection of glycerine or sweet oil may be of great use, preferably the latter, but all large injections are, I think, dangerous. Lastly, gentlemen, let us ring the deathknell of purgatives, laxatives, and cathartics and the rest of the lot, for they are condemned even by their makers and to my mind it is better not to use any thing at all than to use them.

WHAT HOMEOPATHY HAS DONE FOR SURGERY.

We have frequent occasions to write about homeopathic surgery in the pages of this journal. In all these we have endeavoured to show that in the so-called surgical cases homeopathic remedial agents have done much to avoid many manual interference. In fact homeopathic physicians always recognise the therapeutic value of homeopathically chosen remedies in cases which were considered by allopaths as requiring instrumental help. Professor Billroth says that "medicine must become more and more surgical."

It is otherwise with the members of the new school of medicine. Dr. Finke of Brooklyn in an admirable article "Surgery Homeopathy can dispense with" points out that there is no difference between a surgeon and a physician. He says "perhaps it is wrong to divide medical men into surgeons and physicians. Surgeons should certainly be also physicians."

He further remarked that "Homeopathy, as a general rule, can dispense with any surgery which has no relation to it. Surgery must be interconnected and interlaced with the teachings of Hahnemann. It should never forget that it is not the material body alone it has to deal with. Hahne-

mann therefore wisely remarks that surgery is only the means, by removing external mechanical impediments, to enable the life force to restore the injured parts of the organism to their integrity. It therefore follows that surgery which goes to work without hesitation at once to operate by mutilating the body, amputating limbs without applying the remedies homeopathic to the case and only stupefying the senses that the pains are not felt, can be dispensed with."

So we always have to point out that when we are to deal with surgery we must place great reliance on surgical therapeutics. The allopaths have seldom any remedial means at their command to work out the salvation of these cases. They always advise their patients to take away the diseased parts by surgical interference without minding that at the bottom of these there lies hidden the real disease, and without a remedy how can it be eradicated. This is plain enough. How often have we seen a scirrhus of the mamary gland, where a surgeon extirpated the whole gland and its axillary infection, make its appearance in another gland or in a distant part and thus cause the ultimate death of the patient. How often a limb has been saved by the timely administration of homeopathic remedy where a thoughtless surgeon would have amputated the part.

Another invaluable article has been presented by Dr. Thomas M. Dillingham of New York city. The renowned doctor has an extensive surgical practice among the homeopathic fraternity of the United States. Let us see what he has said about surgery in general. "Homeopathy has done much for surgery, for it has so outstripped allopathy that the leading minds of that school, at least ten years since, declared that the medicine of the future in their own school would be surgery. Having no hope in their own make-shift

methods of therapeutics, and not being endowed by nature with a mind capable of grasping so simple and beautiful a thing as the law of cure, they are all becoming surgeons and chagrin is now becoming all of the honest men among them. The mercenary men (and they are a great lot) do not and will not see, except when the people educated and instructed by the cures made by the strict adherence to homeopathy will demand something better, just as they stopped "bleeding" when the people revolted. Their situation is simply this ; failing in therapeutics, they all rush to surgery leaving us the field. Surgery will fail to accomplish, even in small parts, what they promise and what they honestly expect. Consequently, homeopathy to-day occupies a more responsible and conspicuous position than ever before. Homeopathy has driven the old school of medicine absolutely out of the field. One has but to look at the frantic manner in which they grasp at every new remedy; almost all of them proprietary or patent medicines, and they use them only to cast them behind and search for others in exactly the same manner as the lost traveller without guide or compass wanders hither and thither until overcome by exhaustion.

Observing the wonderful results of homeopathy, they concluded that diet was the secret of our success, and to-day we see the world flooded by all sorts of patent foods, which are also becoming disgusting to their followers. They also are fleeing to hydropathy : and almost all inflammatory diseases are treated by this method, in one form or another ; yet it is but a few years since they raised their voice in condemnation of such nonsense. They boast of many scientific men, who are constantly promising, and boasting, but never fulfil the expectations of their patient listeners. Surgery is overrunning the world like a pestilence and homeopathy is helping it to gain its

present position by driving into its domain such minds as can grasp nothing better. These men will soon have to operate upon each other, just as the men in the stock markets have to treat upon each other, for the people trust them no longer !

There is not a shadow of exaggeration in the lines quoted above. The article is so nice that we are tempted to reproduce it wholly here. The doctor has said here what we should always bear in mind in our choice in surgical treatment. He says "I do not say that we can get on without skilful surgeons ; we must have them, but we need but few, very few and they should be called as consultors, and permitted by law to operate only after homeopathy has been unable to cure, and has declared it a surgical case. No allopathic surgeon is able to judge of the necessity of surgical procedure, because he knows nothing of curative medicine ; he is simply scientific, if you know what the word means, or better still, what it represents at the present day in medicine ; I confess I do not. Look at the operation so often resorted to in the present year for appendicitis ; in fact in any operation you choose. Homeopathy should develop the most skilful and most successful surgeons ; still very few, as I before remarked, are necessary because such an enormous proportion of all so-called surgical cases are easily curable with the homeopathy of Hahnemann."

Further remarks on this subject are unnecessary. We, as homeopaths, have golden treasure in our stock and why are we to ask uncertain and often dangerous assistance from those who have nothing to guide them.

One word more from Dr. Dillingham's excellent words of counsel and we finish. His advice is simply admirable and should be our guiding way. He says—

"Consequently it behoves the Hahnemannian physician

to keep all his senses alert. There is danger of being blinded by the charming results of the indicated remedies. While he is positively certain that the law of cure elaborated and brought into use by Hahnemann is nature's law of cure, he must and will, if humane, recognise human limitations, his own limitation and call to his aid when embarrassed, men who may have talents other than his own. We should watch closely the best literature of all schools of medicine, and observe with precision and intelligence the mechanism devised by a deluded but earnest set of men. When we are unable from any cause to reach a patient with the natural cure, if the cure must be from its very nature and the circumstances which surround it, slow, we must often look to the surgeon, for his mechanism will sometimes assist us and yet not harm the patient. Surgeon is a member of our own school, we must not hesitate to turn the search-light of homeopathy upon all that he promises, and upon all that he accomplishes."

Dr. Dillingham is a scientific and experienced surgeon in New York and his opinion is to be regarded as the best in surgical practice.

CLINICAL CASES.

I.

Babu K. B. Mandal's grandson, aged one year, had an attack of fever and cough on the 2nd of January, 1908. The baby was treated by an allopathic doctor without much benefit. I was called on the morning of the 11th and found the following conditions and symptoms :—

Fever very high, temperature 105° F., great restlessness, heaving breathing, drowsiness, deglutition difficult and painful, dry hacking cough constant giving no rest.

Hands were clenched and lightly grasped, face distorted. Every 15 to 20 minutes convulsive fits of great violence. During fits redness of face and almost lock-jaw. Bowels obstinately constipated. Tympanitic distention of abdomen. Some perspiration on face and neck, more during the convulsion.

Belladonna 200, one dose, every six hours till improvement noticed when the medicine was to be stopped. Three doses were given that day.

12th morning.—Temperature 103° F., tympanitis less, convulsions disappeared. One hard blackish stool at night.

Placebo, one powder every six hours as before.

Next morning the report was favorable. Though I did not visit the patient, I was told he was convalescing. Placebo as before.

Two days after I was called in a hurry. The patient was in extreme agony, violent convulsive fits and shaking of the whole body, especially the hands and feet. There was first interlocking of jaws.

Cuprum met. c. m., two globules dry on the tongue ; after great effort the jaws were separated and globules dropped in. Fever was almost gone and bowels regular.

No more medicine was given that day and the child made a perfect recovery in three days more.

II.

Cough and cold. Merc. Iod.—An elderly gentleman of sanguine temperament, very healthy and active had an attack of coriza accompanied by severe dry and teasing cough. There was a good deal of running from the nose which was at one time thin and fluent and at another thick and obstructive

Nose was generally stopped at night necessitating breathing through mouth.

There was peculiar painful sensation and heaviness behind the hard palate, near the posterior nares. Sneezing in the morning and evening. Sensation of heat and burning in both eyes, specially the left. Feverish sensation in the evening. Bowels regular. Better out of door and after bathing. Worse at night and in open air. Application of cold water to the face and eyes gave temporary relief and also better after taking food. Mucus from the nose was sometimes tinged with blood. Tongue coated dirty yellow.

Arsenic 30, one dose, morning and evening, No relief. A few doses of Arsenic 200 were given. Not the slightest improvement.

There was sticking pain in the posterior nares when deglutition was performed and also during swallowing of saliva which was profuse and sticky.

Merc. Iod. 6, one dose, morning and evening.

Much better the next day. The sticking pain disappeared, burning sensation in the face and nose almost gone and much comfort felt.

There was still stoppage of the nose and discharge of thick glutinous matter from the nose, more at night.

Merc. Iod. 30, morning and evening.

Much better the next day. Cough less troublesome, attended with easy expectoration of thick yellowish sputa.

Merc. Iod. 30 continued and in three days' time all complaints disappeared. Tongue was clear and no emission of saliva. In fact the patient was completely cured.

III

On the morning of the 10th November, 1907, I visited Babu L. M. Bose, aged about 29, with high fever and general weakness. I got the information that he used to get fever at 9 A. M. with shivering, followed by burning heat and

great thirst. Fever broke up in the evening with little sweat.

There was a kind of rheumatic pain in the whole body which was aggravated by movement and least contact ; cold morning breeze was unbearable, felt chill, and the pain was worse.

There was constipation, desire for stool but nothing came out.

Hands and feet cold. Temperature during the height of fever was 103·8. Pulse 140. Before I went there, he was under homeopathic treatment and Nux V. and Natrum Mur. were tried without much benefit.

I gave him a single dose of Rhus Rad. 6x, as I had no higher potency in my medicine case.

The next day improvement was marvellous. Though fever came in the usual time, the concomittant symptoms were, for the most part, mitigated.

Sac. lac. two powders morning and evening.

Improvement continued and the patient felt much better. There was slight chill and fever. Sac. lac. continued. Suffice it to say that in two days more he got rid of his fever ; there was no paroxysm and complete cure was effected.

Even the lower potency in single dose can effect a permanent cure if the remedy is properly indicated.

IV

Mr. A, a strong-built young man was down with fever and cough on January 22, 1908. He came under my treatment on the 27th of the same month. I found him lying prostrate in the bed with considerable fever, cough, pain in the chest and extreme prostration. The pain in his chest was so great that he could not move an inch in bed.

On examination of his chest I found diffused inflammation of his left lung and slight patch in the right one. His

breathing was hurried and there was dilatation of the nose. Constant cough with expectoration of bloody and tenacious sputa. The expectoration was not easily detached.

Could not take his nourishment properly. There was tympanitic distention of abdomen and obstinate constipation. Fever was 105 F. and pulse thready and frequent.

Lycopod 30, one dose, morning and evening.

Almost the same state. Lycopod 200, one dose and placebo three doses.

30th January. much better but still there was flatulence.

Lycopod 200 one dose and placebo 3 doses. Placebo continued for days and he was improving. Suddenly on the 4th February fever increased and he talked about his business in delirium. Temperature 105 F. again and cough dry and teasing with pain in the chest.

Bryonia 30, every 4 hours, three doses. Delirium not better and fever rose to 106 F. Hyoscyamus 200, two doses on the 6th February. Prostration was extreme. On the 8th he was better in every respect ; fever gone and delirium disappeared but there was extreme prostration. Placebo three times a day.

15th. Slight fever in the evening, diarrhoea and weakness. Sulph 200, one dose.

After that the patient was improving steadily. Diarrhoea stopped, and the patient took his nourishment fairly well.

The patient was convalescing and took a long time for perfect recovery.

V.

A robust youngman, aged 25, came to me with a long history of his illness. He contracted syphilis two years before the 10th of December 1904. He was placed under allopathic treatment and Idoform was applied and the sore healed up.

After this apparent cure he was free from all ailments for

three months. Then suddenly he noticed copper-colored small eruptions all over his body, especially in the palms of both the hands and soles of feet.

He took Iodide of potassium and other allopathic stuffs. Eruptions disappeared after some days, but his complaints had been various. First of all was the sorethroat, pain in deglutition and angry looking red spots and swellings were visible all over the palate and fauces.

There was nocturnal bone pains which were aggravated on movements and by cold. No swelling of any joints noticeable. Pains severe from sunset to sun-rise. There were some nodulated spots in the scalp which were painful on pressure. There was intense headache and slight feverishness.

He gradually lost strength and became thin and emaciated. Bowels were regular but the taste metallic.

I thought Mercury to be the true remedy in this case. Merc. viv. 30, one dose, morning and evening.

Some of the symptoms were ameliorated but not a decided improvement was noticed. The medicine was stopped but the condition of the patient was still the same. His fever and headache grew worse and his suffering was extreme, especially during full and new moon.

Stillingia sylv 3x. morning and evening for one week.

No improvement. Headache was terrible and pain in deglutition appeared again.

Syphilinum 200, one dose, dry on the tongue on the evening of the 4th January 1905. It had a charming effect. The headache and sorethroat stopped at once and the patient became more cheerful. He was very much depressed in mind and despaired of his recovery. Rheumatic pain was also entirely gone and he wanted more of that powder.

I gave him some placebo powders morning and evening for some days and he was perfectly cured.

This is a very striking case of an inveterate disease so smoothly removed by a single dose of a highly potentized homeopathic remedy.

P. C. MAJUMDAR, M. D.

OPSONINS AND HOMEOPATHY WITH SOME OBSERVATIONS.

No research in recent time has attracted such widespread interest and has given more promise of real clinical value than the work with bacteria and their relation to the human body in the bacterial diseases. No one work in recent times is destined to be the friend of the law of "*similia similibus curantur*" as that which has to do with the relation of the body cells to invading bacteria.

Before taking up the theory of opsonins, it may be well to refresh our memories on some of the former theories relative to the blood and bacteria. For it must not be supposed that our new theory sprang up from a short investigation. This great problem of the relation of the body cells to invading disease has been passing through an evolutionary period since and before the time of the immortal Hahnemann. Hahnemann used the term "*vital force*" for opsonins, and it is a far better word, and means exactly the same thing. What is it that reacts in the case of one patient with a tendency to throw off the disease? Hahnemann called it increased vital force. Wright calls it increased opsonin index. Hahnemann knew it was true because he had discovered the relation between drug disease and abnormal diseased conditions. He had not had the advantages of the microscope, the results of work by Lister, Koch, Von Behring, Metschnikoff, Ehrlich, Wright, and a host of others. Wright found that those persons who

become infected with a certain germ to cause acne, furuncle, carbuncle, etc, become so because of the low resistance of the blood to that particular bacterium, and he has been able to demonstrate that fact in a definite, scientific manner.

Metschnikoff declared that the power of the blood to combat bacteria depended upon the white blood corpuscles entirely. Ehrlich, on the other hand, based his theory upon the power of the body cells to throw into the blood stream an anti-toxin from the diseased cells, which neutralize the toxins left behind by bacteria and by so doing stop the further poisonous action on body cells.

Sir A. E. Wright, in an effort to find a method for combating typhoid fever and keeping in mind the work of Denys and Leclef on the immunization of rabbits against streptococcus pyogenes, and of Leishman in being able to measure the phagocytic power of the leucocytes, found the following. :

From the original : "We have here conclusive proof that the blood fluids modify the bacteria in a manner which renders them a ready prey to the phagocytes. We may speak of this as an 'opsonin' effect [opsono (a Greek verb) I cater for ; I prepare victuals for], and we may employ the term 'opsonins' to designate the elements in the blood fluids which produce this effect."

It has been found that this element in the blood is a part of the blood serum, and that the power of the leucocytes to engulf the bacteria depends upon this opsonin to prepare them.

It is further noted that the serum loses this power on standing a few hours outside the body. It is also easily destroyed by overheating.

An individual having the average resisting powers toward disease will show that characteristic by the fact that the leucocytes of the blood will, by the virtue of the opsonin in the serum, take up a definite number of a given bacteria.

Such a condition is spoken of by the term normal "opsonin index." In a patient suffering from acne, the opsonin in the serum will only be of sufficient power to cause each leucocyte to take up, perhaps, half the normal number of bacteria. Such a condition would represent "a low opsonic index" to the particular germ causing the disease.

If the above statement be taken as a fact, then it must follow that the cause of the given case was due to a lessened amount, or the lessened power of the opsonin which would combat the germ in question. Then, are we not very close to the often repeated statement that the germ is the result rather than the cause of disease? It surely brings us to the fact that a person may have a low resistance to a certain germ disease. Why is it that one person is constantly troubled with acne when another is not thus afflicted? It is not due to an unequal distribution of staphylococci. It must be traced to the lowered resistance of the body cells. One of my old professors, a few years ago, said to me: "Doctors are always talking about the pathological condition of organs, but the time is near at hand when we shall talk in the *cell* language of Virchow." The time is now at hand when we look to the blood as the barometer of the body and the old saying of "Your blood is out of order" is not so far amiss.

A difficult technique is, perhaps, the greatest drawback the application of this principle of therapy will have. Since it has been given so frequently in the journals I shall review it but briefly. It depends upon three products—bacteria, blood serum, and neutrophilic white corpuscles.

The bacteria are grown from an inoculation from the infected area, the causative germ isolated and developed on an agar-agar slant. The culture to be used should be about twenty-four hours old. The germs are washed from the culture media with sterile normal salt solution, the bacteria

finely divided and centrifuged to precipitate any clumps and leaving the emulsion of a proper consistency.

The blood serum is obtained in a tube with ends drawn out to capillaries and one end bent like a hook. A few drops of blood from the patient to be examined are collected in the retainer, and the ends sealed in a flame. The retainer is centrifuged until the serum separates from the corpuscles and is then ready for use.

The white blood corpuscles may be collected from any person or number of persons. Twenty or twenty-five drops are collected into a convenient pipet and thrown into a solution of normal salt and one per cent. citrate solution. They are centrifuged, the clear liquid drawn off and replaced with normal salt solution and again centrifuged. This is again repeated, when all of the serum will be washed out and the white corpuscles remain at the upper layer of the red corpuscles in a convenient place for collection.

Equal parts of the bacteria, blood serum and corpuscles are now collected into a capillary pipet, thoroughly mixed and then placed in the incubator at 37° C for twenty minutes.

A second tube is prepared as the first, substituting the serum from a normal individual. At the end of twenty minutes the tubes are taken out and smeared on slides and stained as other blood smears. In our hands a stain embodying methelyn blue and eosin is the best.

In making indices against tubercle bacilli the germs are taken from stock cultures or scrapings from Koch's preparations and are stained with a carbol-fuchsin stain to bring out the bacteria.

The blood smears properly stained can then be counted. The bacteria in from 25 to 100 neutrophilic leucocytes are counted and an average obtained. In the normal case they would average six or eight. In the diseased case they might

average three or four, in which case the patient's index be expressed one-half, or .5, since the corpuscles would take up only half the normal number of bacteria.

The vaccine is prepared by growing a luxuriant culture of the germ on agar-agar, washing off the bacteria with a normal salt solution, and precipitating the clumps of germs by centrifuging. This suspension is standardized against blood of a known corpuscle count in the following manner: Equal parts of blood, bacterial suspension and citrate salt solution are drawn into a capillary pipet and, after mixing thoroughly, are smeared on a slide and stained in the regular way. Several fields of corpuscles and germs are then counted and the proportions of germs to red corpuscles estimated. A bacterial suspension containing 100 000,000 bacteria per c.c. is convenient. This standardized suspension is then transferred into sealed tubes holding 1 c.c. each. These tubes are then heated to 60° C. for thirty minutes. To insure the death of the germs in the vaccine, cultures are tried and guinea pigs inoculated. Lysol is usually used as a further precaution as a preservative.

I shall not attempt to say how vaccine makes a cure, except to make the statement that when a patient is suffering from a certain germ infection, like *staphylococcus aureus* in acne, that person has a low opsonic index, perhaps, one-half the normal resisting power, or an index of .5. A dose of 1 c.c. of vaccine, consisting of 100,000,000 *staphylococci aurei*, suspended in normal salt solution and heated to 60° C. for thirty minutes, is given. The next day the index would be found to be lower and for the following seven or eight days it would increase until it reached above normal. It would then gradually lower again. Just as it began to lower, a second dose of similar size should be given. It would decrease, but not so much as after the first dose and would

then rise higher than the first dose. This treatment should be repeated until the whole range of the index was higher or at normal.

Having in mind the theory of action of vaccines in germ diseases, physicians of our school all over this country and England have said that drugs homeopathically given produce their effects in the same way. Nor has it been confined to our own school, for did not von Behring say that he knew of no better word to express the action of diphtheria antitoxin than homœopathic? However, we must not confuse our minds with the thought that antitoxin and vaccine act in the same manner. At the University of Michigan, little less than one year ago, believing that drugs given homœopathically would raise the opsonic index in the same manner as do vaccines, we determined to experiment in that direction. The work was taken up by the Drug Proving Department, and it may be of interest to note that the first person to be experimented upon was the President of the American Institute, Dr. Royal S. Copeland. The work was new and there were many obstacles to overcome, and it is nearly a year before we are able to give even a short report. *Echinacea angustifolia* was chosen, being a drug which we give in cases of boils, carbuncles and pustules. Those to be experimented upon were selected from the student body with special care relative to health and habits of living, as is done with all the drug provers with whom we work. They were boarded at the hospital provers' table for eight weeks throughout the test. All knowledge of the drug was withheld also, regarding dosage, although such facts it was not thought could change the condition.

Each prover was given a careful physical examination, as is done for each proving, and in this instance with especial reference to a susceptibility to skin eruptions. The

examination of the urine and blood was carefully carried out several times to insure a normal condition.

When the proving was started the dose was given three times a day, and to insure regularity, a nurse was detailed for that purpose. For the first two weeks a few drops of alcohol in water were substituted for the drug and during that time indices were taken to ascertain the normal resistance or index of the blood to staphylococcus aureus. The index was found not to vary more than .03 per cent. for three examinations; we, therefore, took 1 as our standard since the variation was so slight.

The nurse was then instructed to give 5 gtts. of the 3x dilution and at the end of a week's administration indices were taken. Prover (a) was found to have an index of .854, while prover (b) gave 1.237. It will be noted that the first prover's index had decreased, while that of the second had increased correspondingly. At the end of four days more examinations of the blood were made with the following results: (a) 1.294, (b) 1.137. Prover (a) was beginning to respond, while (b) had fallen off. The dilution was increased to 2x and the same amount given with the following results in two weeks (a poor culture preventing an earlier examination): (a) 1.127, (b) 1.807. The drug was continued another four days and the indices again taken—(a) 1.248, (b) .918.

It appears at once that the indices taken after giving the drug gradually increased. In the case of prover (a) it will be noted that there was not as rapid a response to the drug as in the case of (b), and further, it is seen that the index did not go as high at any time in the case of (a) as with (b). It may be mentioned that the conditions governing the examinations were the same in both provers and at the same time. The bacterial immulsion was the same, the white

corpuscles used were from the same source and were prepared all altogether. The tubes were placed in the incubator not to exceed three minutes apart.

Let us look to the record of the provers and find, if possible, a cause for the variation in the two indices. It may be stated at first, that the susceptibility of individuals to a drug may vary. Second, in the case of (a), during the time in which the proving was made, several pimples developed on the nose and forehead which may indicate the lessened resistance to the germ in question. Third, the element of error which has been considered above.

In conclusion, the writer wishes to leave the impression that these two experiments can be looked upon only as suggestive, but believes that such work should be reported early and, if possible, stimulate a greater number of workers in this direction. The work of Dr. Watters, of Boston University, in this field is very noteworthy and suggests the awakening of scientific investigation along the line of homœopathic therapeutics.

CLAUDE A. BURRETT, PH. D., M. D.

—*The University Homœopathic Observer.*

A FEW WORDS ABOUT THE LIFE OF LEOPOLD SALZER, M. D.

The last of the batch of pioneers of homeopathy in India has passed off in the person of Dr. Salzer of Calcutta. For the last five years Dr. Salzar retired from practice for ill health. He had been suffering long from chronic bronchitis and at one time when he was at Kurseong his life was despaired of. But fortunately for homeopathy he recovered but his health was not restored to former strength.

However he came down to Calcutta and lived a secluded life. Though he retired from active practice, owing to old age and occasional attacks of cold and catarrh, he was dying by inches. At last the end came in view and on Monday the 25th of November at 4 P. M. he breathed his last, calmly and quietly. He died at the ripe old age of 80 years.

His funeral was largely attended by his younger colleague, friends and a large number of admirers. He was not buried but cremated in the new Crematorium erected at the Lower Circular Road Cemetery.

Dr. Salzer was a man of peculiar nature, not an ordinary person. Those who came in close contact with him, knew how wonderful a man he was.

His knowledge and attainments of medical science had been of high order. He was a very successful physician. He was a great enthusiast in the cause of homeopathy and so he was able to spread it through this vast country. His knowledge of the *Materia Medica* was unique. In fact his mastery over various subjects pertaining to the medical profession was of the highest order. Whatever he was bent upon, he used to study hard and master thoroughly. He was a theosophist in his religious thoughts and therefore he studied Hindu and Budhistic texts so thoroughly that he had been able to talk and discuss the most intricate questions with ease and fluency.

Dr. Salzer wrote a book on cholera. It was in lecture form. In fact he began to lecture to the students of the Calcutta Homeopathic School and thus it became a good book on cholera.

His another production was the "Periodic Drug Disorder." In this work he collected the symptoms of diseases in reference to the period of occurrence and aggravation. It is a very useful book.

Besides these, Dr. Salzer contributed articles in various journals both medical and literary. These may be seen in our periodicals in different parts of the world and also in the pages of the Statesman, Indian Mirror and other daily and weekly papers.

Though outwardly he appeared to be harsh in disposition, he was in fact a kind-hearted man. In many instances we found him in jovial nature. He was always kind to his patients. Whenever he believed that a patient is really poor and that he is unable to pay, he was ready to see him without any charge.

He was an honest and candid man ; so whenever he was to say anything unpleasant, he would do so without hesitation. He was often accused for his impulsive nature that he really had. He was a straightforward man, so could not brook anything crooked. He married late in life and only a daughter is the outcome of that marriage. Mrs. Salzer is a very amiable and kindly disposed lady. Her tender care and good nursing were the last solace of the renowned doctor. In fact, it was through her exertion that Dr Salzer lived a happy and peaceful life upto the last moment of his existence.

After his death a condolence meeting was held by the Calcutta Homeopathic society and it was resolved that a portrait of the doctor be placed in the rooms of the society.

A FEW LINES ABOUT ANÆSTHETICS:

On December 21st, 1846, the first surgical operation under the new anæsthetic (ether) in England was performed by Robert Liston, in University College Hospital, London.

In the operating theatre, thronged with students, were the late Sir John Erichsen, the present Lord Lister and many other famous surgeons. Mr. Barton relates an amusing incident which happened prior to the operation. Before the patient was brought in, the anæsthetist asked the students who crowded the benches in the theatre from floor to ceiling for some volunteer who would submit himself to be anæsthetised. A young man, Sheldrake, of very powerful build and a good boxer, at once offered to take the new anæsthetic, and came into the arena. "He lay on the table, and the anæsthetist proceeded to administer the ether. After the administration had proceeded for about half a minute, the subject of the experiment suddenly sprang up and felled the anæsthetist with a blow, and, sweeping aside the assistants in the arena, sprang shouting up the benches, scattering the students, who fled like sheep before a dog. He fell at the top bench, where he was seized and held down till he regained his senses. The whole scene hardly occupied a minute.

Before operating, Liston addressed a few words to those present as to the nature of the experiment about to be tried. The ether was administered by Mr. William Squire in an apparatus he had devised, which consisted of a large bell-shaped receiver containing the ether, to which was attached a long tube and mouth-piece. The patient, a middle-aged man, who was suffering from malignant disease of the skin and tissues of the calf of the leg, for which amputation of the thigh was deemed necessary, passed easily into complete insensibility, and Liston rapidly removed the thigh, the cutting operation being declared to have lasted only thirty-two seconds. In a few moments the patient completely recovered consciousness, and apparently did not know that the limb was off. When the towel was removed from the uplifted stump so that he could see it, he burst into tears and fell back on his pillow. Both surgeon and patient were much affected, and the scene in the theatre was most impressive. All appeared to see what an incalculable boon was in store for the human race, and Liston could scarcely command his voice sufficiently to speak.

Some amusing stories are related of Liston, who was a very big powerful man. His fine physique was often useful in the pre-anæsthetic days, when a patient's nerve gave way at the last moment at the sight of the crowded theatre and the operating-table with its straps. It is said that on one occasion a patient, losing his courage at the last moment, rushed shrieking down the long corridor of the hospital, with Liston at his heels. The man locked himself in a room, but the surgeon with his shoulder broke in the door, and half-dragged, half-carried the poor wretch back to the operating theatre, where the operation for stone was successfully performed.

Book Review.

The Enthusiasm of Homeopathy.

With the story of a great enthusiast.

By JOHN H. CLARKE, M. D.

*Reprinted from the Journal of the British Homeopathic Society,
January, 1907.*

London : Homeopathic Publishing co. 12 Warwick Lane, E. C

This book is the substance of the address delivered by Dr. Clarke at the British Homeopathic Society. It contains the story of a great enthusiast in the person of Dr. Mure. It is a remarkable history of a man's enthusiasm for the Cause of Homeopathy. At the present moment we urgently require the growth of some such enthusiasts for the propagation of Homeopathy in every country of the world. Dr. Mure was a Homeopath by conviction as he himself was cured by the aid of homeopathic remedies in an almost hopeless case of pthisis pulmonaris. This brochure should be read by every body.

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THE INDIAN HOMEOPATHIC REVIEW.

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[No. 3.

HOMEOPATHY AND THE PEOPLE'S FAITH IN THIS SYSTEM OF TREATMENT.

It is now over fifty years that homeopathy has been introduced in Calcutta and it is well that we should occasionally review the situation and look at the position that we as homeopaths occupy among the people of this city.

It is true that from one or two physicians we can now count our members by the hundreds. From the city of Calcutta it has spread into the suburbs and in fact in parts of Bengal also. It may also be said that some of the physicians of our rank have a very large practice and hold a position quite as high as that of the highest men of the dominant school. But is it not a most unfortunate thing that though we have made much for ourselves through the instrumentality of Hahnemann's system, we have as yet been able to do nothing for homeopathy. There is not a single homeopathic hospital or dispensary worth the name where the poor might avail themselves of the beneficent efforts of this system of treatment. Of late a project was started for the establishment of a homeopathic hospital but as yet it has not borne fruit.

..

Our position is never secure until we have a hospital of our own. We cannot show people by actual statics the percentage of cures and deaths in comparison with that of the dominant school. The glory of the pioneers of homeopathy that they were very successful in the treatment of cholera and other malignant diseases is gradually becoming the vauntings of irresponsible and unscrupulous quacks, who are gradually infesting the market and bringing disgrace on homeopathy by their concocted ills.

Then again people are beginning to think that homeopathy is good in cholera and for children and is no good in fevers and the like maladies, and in this belief our friends of the other school do not hesitate to fan the fire. We know that homeopathy is eminently successful in the treatment of fevers and the allied maladies, but that knowledge is confined to individuals. Unless and until we have a fully equipped hospital of our own our position in this city is not secure.

J. N. M.

A FEW CHOLERA CASES.

I.

At midnight a telephone message summoned me to the bedside of a cholera patient in Bowbazar. The patient a young man of twenty five years of age, a medical student, was attacked with the disease in the morning and had been up to the time of my visit under allopathic treatment.

His body was perfectly cold, the pulse was imperceptible, there was marked tympanitis and the respiration was slightly hurried. The stools were perfectly watery and there was persistent vomiting. He desired for cool things and, wanted a cool place to lie upon.

Nux Vom, 200 one dose, followed by Placebo every hour.

I visited the patient again early next morning. He was

in a much worse condition. The tympanitis was more marked and there were violent cramps with it. The patient was in great agony. The spasms were very painful. Cupr. Ars. 30 every 2 hours.

I saw the patient about 11 A. M. and found him almost in the same state. The motions had stopped and tympanitis greater. Secale 30 every 2 hours.

Now I remained with the patient for sometime as I considered his condition critical. After 3 or 4 hours the patient seemed to be a little better. The cramps were no longer so severe and he had two large yellowish motions which seemed to relieve his tympanitis a great deal.

Placebo continued during the night. About midnight he passed a copious quantity of urine and all his symptoms were relieved.

The next morning I visited him early and found him much better. His body was warmer and the pulse was distinctly perceptible at the wrist. But he complained of great pain in his body, so much so that it hurt him to move and he said that his breathing was not quite easy although I would detect no irregularity about it. Bry. 30, one dose.

From now on the patient made an uneventful recovery and I sent him home on the fourth day for a change to recoup his health.

II.

A young lady, niece of the above patient, was attacked with the disease while attending on him. She was already much reduced in health having lately undergone a very serious operation.

I saw her in the morning and found her having frequent yellow stools with griping pains. She also vomited several times. She was of a melancholic disposition and had

indulged in sweets and pastry the night previous. Pulsat. 30 every 3 hours.

I visited her again at 3 P. M. and found the whole household in great commotion. Although the purging and vomiting were somewhat better, she suddenly had a sort of a hysterical attack which frightened every body very much.

I had left another physician in attendance whose timely administration of a dose of Nux moschata 30 had very good effect. Now the patient came out of the attack very nicely but strange to say her power of speech was completely gone. The husband of the patient was very much alarmed. I assured him that it was only due to weakness and would be all right soon.

Placebo continued. I saw the patient again at night and found her in about the same condition, only the vomiting had been somewhat distressing and constant. Iris Vers 30 two doses during the night.

The next morning I saw the patient early. She had slight fever and she complained of headache. Her pulse was excited and a bad complication had arisen. The menstrual flow had made its appearance. This is a very distressing complication and I dreaded it very much.

Bellad 30. every 3 hours during the day. I saw the patient in the evening again and found her somewhat better. The fever was less and she felt more easy generally. The flow continued. I gave a dose of Lil. Tig. 30 and two doses of Pulsat on the following days and she was all right in four or five days.

J. N. MAZUMDAR, M. D.

MATERIA MEDICA NOTES.

Tuberculinum is the best remedy for tubercular meningitis when symptoms agree. Following are worthy of notice, Severe headache aggravated on the second day, lasting until third, sharp cutting pain passing from above the right eye, through the head to the back of the left ear.

Swan has the following symptoms. Headache of great intensity preceded by a shuddering chill passing from brain down the spine ; became unconscious with screaming, tearing her hair, beating her head with her fists and trying to dash it against wall or floor. Tubercular meningitis with effusion alternately wakeful and delirious at night. Nocturnal hallucination and fright, delirium and pyrexia (Burnett.)

In incipient tuberculosis; Dr. Burnett found it of much value.

Dr. Rabe says "Tuberculinum is many times chronic of Pulsatilla, and resembles the latter in its amelioration in open air. Many of its symptoms are also aggravated in the evening." Tuberculin also resembles Phosphorus in many respects. It has hoarseness even to aphonia increases with much oppression of chest. Phosphorus has aggravation from cold open air differing here from tuberculin. Tuberculin patient will even in mid winter lie thinly covered with cold air sweeping over her. Mentally the patient is irritable, fretful and morose.

Dr. H. C. Allen says "Tuberculin when given for the symptoms that it produces on the healthy, is one of the most valuable remedies, and should be given without any reference whatever as to whether there is a history of tuberculosis in the patient or his family or not."

"This remedy acts frequently best in the single dose. Its symptom list of diseases of the skin exceed very much that

of Sulphur in number. The irritation of the skin resembles obstinate cases of eczema. A great deal of moisture and oozing and itching, is aggravated by rubbing or scratching, extremely sensitive to touch."

"There is extreme sensitiveness to atmospheric influence. There is no remedy in our Materia Medica so sensitive to change of weather, to cold, to heat, as tuberculinum. It is as sensitive as Lachesis or Sulphur to the heat of summer, as Kali c. to the extreme cold of winter ; as Mercury or Rhus t. to weather changes."

"With diarrhoea and derangement of digestive tract, the patient has an enormous appetite. Hungry all the time. Wakes up in the night and wants to eat, and takes something to bed in order to sleep."

Dr. Allen uses three different preparations of tuberculin. First the original preparation of Koch. Second the Bacillum of Burnett. And last is a preparation from a tubercular abscess of the lung used by Swan and Fincke in their preparations. One made by Boericke and Tafel on Skinner potentizer, was also used by Dr. Allen and is active and reliable.

Calcaria Fluorica. It is a very useful remedy but not often resorted to.

Among its mental symptoms the feeling of anxiety about money matter is very characteristic. Depression of spirit. I know of a gentleman who has been suffering from diabetes and almost well under my treatment. Suddenly he had anxiety about his business in money matters, the disease increased to an enormous extent. Calc Fluorica set him right. Flickering and spark before eyes mostly felt.

After writing sometime was no longer able to see distinctly, because of a blur or mist before eyes with some aching in the eyeball ; better when closing eyes and pressing tightly on them.

Spots on cornea ; opacities.

I cured several cases of opacity of cornea with this medicine. Copious, thick, offensive, greenish yellow discharge from the nose, ozena.

Bleeding from relaxation of the coats of blood vessels. So it is very useful in bleeding piles with constipation or slight diarrhœa. Induration of glands is often found.

In most sexual organs, indurations of testicles are often cured.

Hard tumor in the breast.

Exostosis of bones in various parts of the body was cured. I cured a case of goitre with it. Fluoric acid 30 was first given and Calc. Fluor. 30 subsequently which completed the cure.

Indurated cervical glands of stony hardness.

Fistulous ulcers and whitlows are often cured by Calc. Fl.

Patellæ surrounded by supernumerary bones, irregular in shape, varying in size from a millet-seed to marbles ; also abounding at various depths in tendons under knees and also in tarsal and carpal articulations. Dr. Henry. R. Stout of Jacksonville, Florida suggests that anurism in early stage may be held in check or reduced, as this disease is due to a relaxed condition of the elastic coats of arteries ; also in dilatation of the heart.

It is a wonderful remedy in enchondroma of fingers.

Cataracts have also been cured.

P. C. M.

THE ETIOLOGY AND EPIDEMIOLOGY OF PLAGUES.

The Sanitary Commissioner with the Government of India has just issued a Blue-Book, containing a summary of the work of the Plague Commission.

In the early days of Plague in India, most strenuous efforts were made to stamp it out by the means adopted in European

countries in dealing with epidemic disease, but these efforts failed and they too often led directly to the misfortunes which they were designed to avert. When it was recognized that it was impossible to deal effectively with the epidemic without the help of the people themselves, a policy of persuasion and assistance was substituted for the more rigorous measures, but this also failed to prevent the extension of the disease, although in many places some degree of success was achieved.

Considerable progress had been made in the study of the epidemiology of plague and valuable work had been done in laboratories in India and elsewhere, but there remained serious gaps in our knowledge which it was necessary to fill in order to give greater precision to the measures of prevention which it was possible to adopt. In the autumn of 1904, the Government of India therefore addressed the Right Hon'ble the Secretary of State for India with a view to undertaking a more complete enquiry into the etiology of the disease than had hitherto been attempted. As a result of the representation, the Secretary of State replied that, on the recommendation of the Royal Society and the Lister Institute, he proposed to form a committee representing these bodies and the India Office and to grant to them £5,000 renewable annually for the purposes of the investigation, which, it was proposed, should be undertaken under the direction of the committee by two experts chosen and paid by them and two skilled bacteriologists belonging to the India Medical Service. These proposals were accepted by the Government of India, and an Advisory Committee was appointed consisting of the following members :

Surgeon-General Branfoot, C.I.E. I. M.S. India Office, President, Sir Michael Foster, K. C. B., F. R. S. and Professor. J. Rose Bradford, M. D. F. R. S., Royal Society, Colonel David Bruce, C. B. R, A. M. C. F. R. S. and Dr C. J. Martin. F. R. S. Lister Institute.

(On the death of Sir Michael Foster in January 1907 his place on the Committee was filled by the appointment of Dr. G. H. Nuttall. F. R. S.)

The Committee decided that Dr. Martin should visit India to confer with the authorities there regarding procedure and to initiate the work.

Dr. Martin arrived in Bombay early in April 1905, and was followed in May by Drs. Petrie and Rowland, the experts chosen by the Committee. After visiting Kasauli Dr. Martin decided to commence work at Parel, near Bombay, where the Plague Research Laboratory offered special facilities.

In May the Government of India placed Captain Liston's services at the disposal of the Committee. Dr. Martin, having resolved to remain in Bombay during the summer, dispensed with the services of the second officer of the Indian Medical service during his stay. Shortly before his departure on the 14th October 1905, the services of Major Lamb were placed at the disposal of the Committee. Before his departure Dr. Martin represented the desirability of further assistance being given, and Captain Gloster, I. M. S., was deputed to work in the Punjab under the orders of the Committee. When Dr. Martin left India he handed over the direction of the working Commission to Major Lamb as Senior Member when the Commission consisted of the following members.

Mr. George Lamb, M. D., I. M. S., Director of the Pasteur Institute of India, Kasauli, Senior Member.

Captain William Glen Liston, M. D., I. M. S., Plague Research Laboratory, Parel.

Captain Thomas Henry Gloster, M. B., B. Ch., I. M. S. *

George Ford Petrie, M. D. Assistant Bacteriologist, Lister Institute.

Sydney Rowland, M. A., M. R. C. S., L. R. C. P., Assistant Bacteriologist, Lister Institute.

M. Kesava Pai, M. B., C. M., Assistant Surgeon, Assistant to the Director, Pasteur Institute, Coonoor; lent by the Government of Madras.

V. L. Manker, L. R. C. P., L. R. C. S., D. P. H.

P. S. Ramchandrier, Hospital Assistant, Mysore; lent by the Government of Mysore.

C. R. Avari, Hospital Assistant, Plague Research Laboratory ; lent by the Government of Bombay.

The Commission thus constituted continued to work until May 1907, when it was considered that satisfactory replies to the questions which had been placed before them had been found and the Commission was temporarily dissolved.

• The head-quarters of the Commission remained at the Plague Research Laboratory, Parel, the Director of which, Lieutenant-Colonel Bannerman, L. M. S., placed every resource of his laboratory freely at their disposal.

It was arranged that reports of the work done by the Commission should be published by the Advisory Committee in the *Journal of Hygiene*, of which two numbers containing reports have already been published. It seemed to the Government of India, however, necessary that an account of the work done by the Commission should be submitted in a simple form to the public as soon as possible, and a summary has been compiled for that purpose. It is intended that the facts ascertained shall be used by administrators in framing measures for the prevention of plague, and it is hoped that the knowledge of the facts will help the people to understand the reasons for those measures.

GENERAL CONCLUSIONS.

The following are the general conclusions —

1. Pneumonic plague is highly contagious. It is, however, rare (less than 3 per cent of all cases) and plays a very small part in the general spread of the diseases.

2. Bubonic plague in man is entirely dependent on the disease in the rat.

3. The infection is conveyed from rat to rat and from rat to man solely by means of the rat flea.

4. A case of bubonic plague in man is not in itself infectious.

5. A large majority of plague cases occur singly in houses. When more than one case occurs in a house, the attacks are generally nearly simultaneous.

6. Plague is usually conveyed from place to place by imported rat fleas, which are carried by people on their persons or in their baggage. The human agent not infrequently himself escapes infection.

7. Insanitary conditions have no relation to the occurrence of plague, except in so far as they favour infestation by rats.

8. The non epidemic season is bridged over by acute plague in the rat, accompanied by a few cases amongst human beings.

WHAT IS HOMEOPATHY ?*

BY ROYAL S. COPELAND, A. M. M. D., Ann Arbor, Michigan.

"When years after his death the world agrees to call a man great, the verdict must be accepted. The historian may whiten or blacken, the critic may weigh and dissect, the form of the judgement may be altered, but the central fact remains, and with the man, whom the world in its vague way has pronounced great, history must reckon one way or the other, whether for good or ill." But to properly measure a man, long since dead, we must know something of the time in which he lived ; something of his environment, something of his contemporaries. If, as was Hahnemann's case, the subject of our study belonged to one of the learned professions, we must know, not only his own personal attainments, but also how these compare with the most advanced thought of the medical leaders of his time.

Samuel Hahnemann, born in Saxony, a century and a half ago, was the founder of the Homeopathic School. Medicine, in his day was a mass of chaotic and unscientific pre-

* By invitation of the Regular Homeopathic Society, this address was delivered in the Chicago Public Library, Dec. 3rd, 1907. The audience was made up of laymen, as well as physicians, and for that reason the thesis was couched in popular language:

tence. Disease was looked upon as due to the presence in the blood of certain so-called humors or morbid products. The removal of these by means of large doses of powerful drugs, the nature of whose action upon the organism was not understood, was considered necessary to the restoration of health. It was thought that drawing large quantities of blood from the body accomplished this; therefore, without regard to the nature of the disease which affected them, all patients were bled. Disease was considered to be a material entity, which had to be destroyed, without regard to the effect on the body of the measures and drugs employed. Besides many drugs yet familiar to the profession, it was common practice in that time to prescribe such things as hearts of vipers, earth worms, green lizards, live frogs, ~~river~~ crabs, to quote from a famous old prescription, "shavings of a man's skull that dy'd a violent death."

In opposition to the prevailing crude, and disgusting ways of treating disease, Hahnemann proposed the simple and scientific method which has become the rule and guide of a great and growing profession. Hahnemann and Homeopathy are so intimately related that to think of one must be to consider the other. The Hahnemann of history lives in the Homeopathy of reality. To properly estimate Hahnemann, the physician, we must take the record of the multitude of his cures. To appreciate Hahnemann, the scientist, we must consider the man who promulgated, for the first time in history, a law of practice universal in its application. It was not alone for the eighteenth century and for Germany: it was for the twentieth century and for us.

The ordinary man is satisfied with his surrounding and contented if he possess the talents common to most of his professional brethren. The legal standard is high enough for him and as we all know, that requires of every physician

simply an average degree of intelligence and average professional skill. The men in medicine who have taken positions far in the lead of their colleagues are conspicuously few in number. By the very nature of his calling his vital relation to human life, the physician is conservative, ultra conservative in fact. He knows enough of the human organism to realize it is not a machine to be dealt with as the mechanical engineer deals with the problem presented him. Furthermore, the human organism differs from the machine too,—the doctor's problem has a throat and it is capable of vocal protest against Would-be experimenters.

This prejudice against innovations in medical practice has prevailed for all time ; indeed it is so pronounced that in some countries it has been customary to mete out punishment to the practitioner departing from the recognized and standard methods of treatment. In old times, burning at the stake and burying alive have been favorite rewards for the genius who thought to attach his name to an advanced idea in medicine. The modern way is not so trying physically, but Samuel Hahnemann in his life-time could testify to persecutions most vexatious.

But in spite of opposition from a profession naturally unprogressive and unnaturally jealous, Hahnemann, the physician and scientist, promulgated a theory of cure and a method of drug administration which for a hundred years have proven to be an unconquered fortress against the assaults of every foe. To-day, this theory of cure, while unaccepted by the dominant school, as a law of nature, is verified in every procedure of its practitioners, at least, in every procedure regarded by those therapeutic agnostics as being among the certainties, the verities of practice.

With the consideration of Hahnemann's method of drug administration, our cup of joy o'erfloweth. Ridiculed and

laughed at for a century, the scientific world has come to admit that Hahnemann was the chief scientist of his time. Not only so, but his doctrine of the efficiency and increased efficacy of drugs in infinite dilution is accepted to-day in every laboratory of the world.

LIFE AND HEALTH.

To the lay mind, health and disease are terms which define conditions, one desirable and the other to be avoided. Beyond this vague mental description no further thought is given the problems which vex and perplex the scientists and divide the medical profession into great factions or "schools." With the conflicting and vacillating opinions of the past, it was necessary to be something of a mental gymnast to keep abreast of the rapidly changing ideas of scientific thinkers. Fortunately, however, this chaotic condition is giving way to an orderly arrangement of established facts and, to-day, we know for a certainty many very interesting things about health and disease.

It is now believed that life depends upon the activity of the bodily cells. Going from the gross mass of the body to the separate and distinct tissues and from these to their minutest portions, it has been determined that the smallest possible division of living matter, capable of form and function, is the cell. The infinitesimal size of the cell is something amazing ; in the liver, for instance, it has been found, by careful measurements and estimates, that a single cubic inch of that organ consists of 156,000 million separate and distinct cells.

Health depends upon the well-being of every cell of the body. The cells must be nourished and refreshed, waste products must be carried away, and new material supplied as required. In the light of present knowledge, disease con-

sists of some disturbance in the metabolism of the cell. By this term, metabolism, we mean the balance or equilibrium which exists between food supply and waste ; normally, this condition is reached when the active cell constantly receives and assimilates precisely the right amount of exactly the proper food. In disease this balance is disturbed ; insufficient or improper food interferes with the cell, causing it to be over-active or under-active, or to die. Then the individual becomes conscious of certain symptoms which are indicative of disease, and the physician's duty begins.

THE SMALL DOSE.

With this much scientific knowledge, briefly stated though it is, the lay mind will at once appreciate that medicine to be of use to one of these bodily cells must be administered in such form and quantity as such an infinitesimal thing is capable of receiving. One might as well attempt to patch a pin prick with one of the pyramids as to expect a tea spoonful of medicine to be appropriated by a cell. Only a very, very minute portion of such a dose, relatively so enormous, can be appropriated by the diseased cell ; the untouched portions of the dose are in the system as a menace to myriads of other cells, which may and probably will be poisoned by the unwelcome drug. Perchance the cell or cells originally diseased may be restored to health, but the patient has gone from Scylla to Charybdis by having thrust upon him an illness quite as bad or worse, the direct result of drug action.

The quantity of medicine to be given in each dose bears no essential relation to Homeopathy ; it is the privilege of the prescriber to administer a grain, an ounce, or any amount which appeals to him as required by the patient. The homeopathic physician believes however, that the "minimum

dose" should be administered, that is, that the smallest possible quantity, capable of relieving the need of the patient, should be given. This is the ideal prescription, because it exactly supplies the demand of the diseased cells, without disturbing other normal cells. In practice, therefore, the homeopathist usually dispenses small doses.

The popular notion that the strength or power of a chemical is in proportion to its mass, is no longer the view of scientific men. It is now held that a very small amount of a drug or chemical, when perfectly dissolved in water or some other liquid, is much more potent than a thousand times as much of the same chemical in the dry state or imperfectly dissolved. This is the teaching in every laboratory of the world. Practical application of this fact is found in the modern use of blue vitriol in purifying water. A quantity so small as to have no effect upon the cells of the human body is yet capable of causing the death of certain algae which possess a selective affinity for this particular chemical.

In the human body the cells of particular parts possess this same selective affinity for certain drugs or chemicals. When an infinitesimal amount of silver, for instance, is taken in to the system, it may be found in certain tissues of the brain and always there, when it cannot be discovered elsewhere. Thus it is apparent that when any cell of the body lacks a given element necessary to its well being, its power of selection of the missing element, or "tissue proclivity," as it is termed, enables it to appropriate the same from the blood stream if it be there in ever so minute quantities.

It will be seen, therefore, that the efficiency of the small dose and the capability of the human system to appropriate and utilize medicine administered in minute quantities

are facts based, not upon a vagary of the imagination, but upon the most modern of accepted truths,

THE LAW OF CURE.

Not only does the homeopathic physician prescribe the "minimum dose," but also, in selecting the remedy for given symptoms of disease, he employs a fixed formula, expressed by the Latin phrase, *Similia similibus curantur*, translated "Similar are cured by similars," i. e., like ailments are cured by like remedies. The possible existence of a law of cure is denied by the dominant school. The latter scoffs at the "theory of Similars," and, in prescribing, depends largely upon experimental and empirical methods. That is, the physician of the dominant school in treating scarlet fever, for instance, tries this, that, and the other remedy, which he thinks might possibly be of some use, until he hits upon one which seems to control the issue of the disease. Or he prescribes in the condition, this, that, or the other remedy, which has obtained a reputation for usefulness in this disease. The first of these methods is, of course, experimental, and the second empirical in the extreme. Besides these, excluding the use of remedies which act simply in a clinical sense as neutralizing agents, a physician of the dominant school has but one other method of therapeutic procedure. This is to prescribe "allopathically," that is, to give a remedy which, by reason of its drug action, produces symptoms the opposite to those induced by the disease. To illustrate ; If the patient have fever, some drug is given to forcibly hold the heart, thus preventing its rapid action with the resulting increase of temperature ; or, in flagging heart the organ is whipped on and forced into more rapid action by the administration of a stimulant, like whisky or strychnine. Such practice is too often fatal in its results and, in

any case, the reaction from or secondary effect of such treatment is bound to be pernicious.

With no fixed formula and no unity of thought regarding the use of medicine, every physician of the dominant school is authority unto himself in the selection of his remedies. The result is that for any given disease, or set of symptoms, there may be as many different prescriptions as there are doctors of the dominant school.

SECTARIANISM.

The homeopathist is frequently called by the dominant school a sectarian and in terms of opprobrium accused of sectarianism. Homeopathy, then, is a sect. Does it therefore differ in this respect from the other school ? The word sect is defined as "a body of persons distinguished by peculiarities of faith and practice from other bodies adhering to the same general system." It is a party of faction.

In the light of this definition, the accepted one, is the dominant school free to cast stones ? Let us pause a moment to inquire into their practice.

Hare of Philadelphia declares his faith in the usefulness and efficacy of drugs as a means of restoring health.

Osler absolutely abandons drugs and looks upon them as useless and many times harmful.

Abbott advocates the alkaloids as universally applicable and beneficial.

Trudeau disregards internal medication and considers the out-of-door life and forced feeding as the essentials in practice.

Kellogg considers disease only in its relation to metabolism, and, standing in the high place of liberal medicine, broad and unsectarian, proclaims to all the world that the vegetable diet is the one and only means of curing suffering humanity !

General Terry wrote me recently, saying that every patient admitted to the Battle Creek sanitarium has a most careful examination, blood count, chemical analyses of the excretions, and secretions, but, strange to say, all paths lead to the one goal—the "shadow" diet.

Studying the announcements of the specialists, the wondering sufferer discovers that Dr. A. uses electricity exclusively. The "life currents" are disturbed, and, to follow nature's way of cure, electricity is the proper treatment for all diseases. Dr. B. depends upon photo-therapy. The X-ray, the Finzen light, the Leucodescent light—in one of these is healing for the nations. But along comes Major Woodruff who says nay to all this. Sunlight he declares, is fatal to the nervous system, and to live long and be happy one must keep in the valley of shadows; the mortality rate is highest where the light is brightest, and longevity is promoted by dwelling in the rainy and gloomy regions of the earth.

The next specialist consulted is a rythmo-specialist, who has a jiggling machine for every vital part. In common with the hydro-therapist he seeks to increase phagocytosis and, by active or passive hyperemia, to accomplish the healing. Then there are the serum-therapy and the organo-therapy specialists. Neither must we overlook the prophylactic doctors who discover the germ and dispatch it ere it begins its deadly work.

We have now reached the last letter of the alphabet and find here the zymo-therapy specialist who, to the horror of the other non-sectarian, Dr. Kollogg, feeds his patients upon meat, thereby, he says, increasing the antitoxins in the blood and neutralizing the products of germ life.

In all candor, is it fair of a profession so broken into parties and factions, each party and each faction so ex-

clusive in its ideas of therapeutics—is it fair, for the adherents of that school to accuse the homeopathist of sectarianism ? Like Saul of Tarsus, they breath out threatenings and slaughter against the disciples of mistaken idea, yet they are as narrow, as sectarian indeed, as they believe the homeopathist to be.

Your speaker has no desire to be better or unkind. He numbers in his friendships and remembers in his prayers many followers of the other practice. But we do not believe the diverse practices of the dominant school show a remarkable degree of scientific exactness.

THE CERTAINTY OF THE LAW.

All this is different in Homeopathy. For a given set of symptoms, no matter where the homeopathic physician was educated or where he may practice, be it in Maine or California, the Dominion of Canada or the British Isles, "from Greenland's icy mountains, from India's Coral strand" the remedy selected will be the same. As in the selection of glasses for a definite error of refraction, scientific oculists from one end of the world to the other will reach the same conclusion as to the need of the patient ; so, in homeopathic practice, definite and positive symptoms of disease will call for the same remedy with every prescriber.

The reason for this marked difference between the schools, as has been said, is because the homeopathic physician believes that in disease and health there are certain laws, as there are in every other department of the physical world, while the physician of the dominant school denies this, or at least denies the value or the so-called law of Similars. It is not possible, perhaps, to explain the rationale of this law of cure, but the homeopathist is not the only scientist forced to acknowledge ignorance of the underlying

laws of his specialty. Where is the physicist who can explain the law of accelerated motion or the law of magneto-electric induction, or the law of gravitation ? He can demonstrate the law by showing experiments to verify it, but to sensibly or convincingly explain why or how, he cannot.

The theologian has the same difficulty with the doctrine of the immaculate conception and the chemist can hardly account for some of the chemical affinities familiar as working truths. Thus it may be excused the homeopathist, perhaps, if he fail to scientifically account for the theory of similars. It is the conclusion of the homeopathic profession that this theory affords a working hypothesis satisfactorily accounting for certain medical phenomena, and the terms of which, outside of purely chemical processes already referred to, *every certain procedure known to the medical profession can be explained*. Further, in order that the lay mind may not misunderstand its position, it is claimed by the homeopathic school that every single remedy, known to have curative properties in the relief of disease, acts in harmony with and is prescribed even if unknowingly so, in accordance with the theory expressed in the phrase, *Similia similibus curantur*.

The dominant school today, therapeutic skeptics* as they

The skepticism, almost nihilism, as regards the value of remedies, of the dominant school; is shown by this quotation from one of its eminent exponents, Prof. H. C. Wood, in the preface of his "Treatise on Therapeutics." "Experience is said to be the mother of wisdom. Verily she has been in medicine rather a blind leader of the blind, and the history of medical progress is the history of a man groping in the darkness, finding seeming gems of truth, one after another, only in a few minutes to cast each back into a heap of forgotten baubles that in their day had also been mistaken for verities. Narrowing our gaze to the regular profession to a few decades, what do we see ? Experience teaching not to bleed a man for pneumonia is to consign him to an unopened grave, and

admit themselves to be, certify to four sure remedies—mercury in syphilis, quinine in malaria, salicylate of soda in rheumatism, and iron in anemia. The most radical of the dominant school, denying the homeopathsity of these remedies, would admit that the poisonous action of each is remarkably similar to the disease it has power to cure. If time and space permitted, in addition, your speaker would attempt at least some citations of remarkable scientific facts which exist and which apparently vindicate the claims of Similia, but enough has been shown to prove that the entire homeopathic practice and such of the practice of the dominant school as is conceded by that school to be of positive therapeutic value, are in harmony with and are explained by the theory of Similars. It is not begging the question therefore, to leave the matter here and claim that until future generations find a better hypothesis we have the right to accept the theory of Similars as the law of cure.

THE VALUE OF THE LAW.

One who has observed the great variety of symptoms met in different types of typhoid fever, or any other disease will at once appreciate the value of a system which seeks to select a remedy suited to the particular case in hand, and to differentiate it from all other remedies useful in other types of the same disease. It is not enough to treat a disease by name, as is the practice of the dominant school, or to prescribe for a disease because of the peculiar manifestations

experience teaching that to bleed a man suffering with pneumonia is to consign him to a grave never opened by nature. Looking at the revolutions of the past, listening to the therapeutic babel of the present, is it a wonder that men should take refuge in nihilism, and like lotus eaters dream that all alike is folly, that rest and quiet and calm are the only human fruitions?"

which are common to all cases of the same disease. The remedy must be selected to fit the special symptoms presented by the individual patient. When so selected, the remedy fits the disease as the wing of the bird fits the air. Any other method of prescribing is as likely to result in misfits as would happen in ready made shoe store if the ridiculous rule prevailed that to every soldier customer a No. 8 shoe should be sold, to every blacksmith, a No. 9 and to every farmer a No. 10. Homeopathy is exact in its methods and employs no ready made garments to fit its patrons, regardless of form, height and station. Every garment is made to order and is fitted only after careful consideration of many patterns.

DISEASE INCREASING.

In the language of Dean Hinsdale of my own college, I do not wish to consume my entire time in an arraignment of the profession of which I am, at least legally, a qualified member. The conclusion drawn is, in part, that the physicians have been human, and in spite of whatever liberal training they are supposed to have had, their horizon has been neither regular nor broad. Of course, old school magnanimity has often shown itself, Dr. Hinsdale continues. A few years ago the American Medical Association held its meeting in the city of St. Paul. At that meeting its learned president, Doctor Charles A. L. Reed, proclaimed a new school medicine. One without dogma, gross medication absurd attenuations, ridiculous anti-mineralism, with refined pharmacy and a more rational therapy. A science in which all may delve, school of human tolerance and honesty, without premium upon personal prerogative, no proclamation of completeness, that recognized the progressive revelation of truth and that greets him who thinks, though he think

error." The doctor wishes to live in a democracy of medicine. Others of his class have given expression to similar views, but, perhaps, with less liberality. Their drift is entirely away from medicine as a system of therapeutics, in favor of the abandonments of drugs altogether, preventive and toward preventive medicine.

"No one restrains the ardent desire for the full development of the new science, Preventive Medicine, or the hope that the time may come when the causes of diseases are stamped out. When tuberculosis, malaria, yellow fever, cholera, plague, typhus and typhoid, small-pox, diphtheria and all the other infections and contagions, together with drug poisonings, like slavery and feudalism are only known historically to have prevailed among men, the medical millennium will have arrived and the doctor, as he has been known or as we know him will be extinct. Until that takes place, the functions of the ordinary practitioner of medicine will be with the concrete, actual presence of the results of infection and other morbid changes.

"A pitiable tale is told by Manager of United Hebrew Charities, Frankel, of New York. From the census reports he demonstrates that the death rate per 100,000 for the most common diseases increased during the decade between 1890 and 1900. In only three diseases out of a list of fourteen was there a decrease, viz., cholera infantum, diphtheria and consumption. The decrease in diphtheria the doctor will certainly attribute to the use of antitoxin, which is not particularly a sanitary method of treatment. Had he consulted the rate for the British Islands for the same time, he would have found an increase in diphtheria rather than a decrease. The decrease for consumption is probably due to sanitary precaution, but tuberculosis is not the only pulmonary plague. The death rate for pneumonia is about the same as that for

consumption. In some localities, pneumonia, as a cause of death, leads consumption. The percentage of decrease in consumption for the period referred to was about twelve ; the percentage of increase for pneumonia, for the same period, was eleven. The decrease of the one pulmonary disease is offset by the increase of the other.

Sanitary science has kept back many pestilential diseases from our shores, and seemed to bring under pretty complete control some others that were one time formidable ; but it cannot be successfully maintained that all the changes in the character of diseases, the ebbs and flows of disease tides are due to, or are controllable by, human efforts. Long periods of time have elapsed when certain diseases have seemed almost suppressed, as we would say, naturally, owing to conditions that we do not understand. These same diseases break forth again with violence and sweep over large portions of the world.

"In spite of all that is being done to purify water supplies, in 1900 there were 3,405 deaths from typhoid fever per 100,000 against 3,210 for 1890 ; an increase of 189 per 1,000,000. It is probable that typhoid fever has been more prevalent for the past two years than it was when the statistics embodied in the last census report were gathered.

"During the statistical period referred to there was an increase in diseases of the stomach of 338 per 100,000. The increase in cancer is alarming, having arisen from 2,203 per 100,000 to 2,837, an increase of 636. Diseases of the circulatory system, by which is meant organic defects in heart, arteries and veins, are becoming more deadly both in this country and in England. During 1900 1,347 more deaths from heart disease occurred than in 1890. There were as many again cases of angina pectoris in 1900 as there were ten years before. The number of deaths from diabetes also

doubled. Bright's disease and other diseases of the excretory organs increase annually by a large percentage. Accidents and suicides, which, of course, are not diseases in the ordinary sense, are increasing out of proportion to the population. Convulsions, which is largely a condition occurring in childhood, seem to decrease, but other disorders of the nervous system, as causes of death, increased by ten per cent. These statistics may be taken by the young physician as encouragement, for they seem to promise him lucrative business for quite a time yet."

When hygienic improvements, serum-therapy, electricity, tubbing, dietetics and other experiments have failed to accomplish all their several promulgators have promised for them, taking advantage of all there is good in them, Dean Hinsdale asks, is it not worth while to turn again to internal medication as a means of curing a part of what cannot be prevented? Of all branches of medicine, therapeutics has been the most neglected. As has been said it has been abandoned by a great many, if credence is to be placed upon their utterances.

In the nature of things, then, the public must turn to Homeopathy because it embodies and represents faith in therapeutics. It is, indeed, the therapeutic specialty. But the layman investigating Homeopathy for the first time has a right to ask whether or not it is a success in practice. Homeopathy must prove beyond cavil that its system is at least the equal of any other in percentage of cures, short duration of disease and low death rate. It is not incumbent upon it to show more, but it is greatly to its advantage to prove, not alone its equality to other systems, but also, if possible, its superiority. If its results are equal to those shown by another system it may be accused of adopting the methods of that school; if they are superior, however, either

the practice is actually different or else the homeopathist has a way of more successfully employing the methods of the other school. In either event the public will be satisfied to give preference to the homeopathic physician.

SUPERIORITY OF HOMEOPATHY.

Statistics are not always reliable, but for the purpose of the present discussion there seems no other way of presenting the truthfulness of this claim. The cities of Baltimore; Cincinnati. Brooklyn, Detroit, St. Paul, Providence, Denver, Indianapolis, Syracuse, Rochester, Nashville and Seattle, are selected as fairly representing every variety of climate and every phase of therapeutic practice. Because the figures are at hand, the year 1894 is chosen and it is no more favorable to the argument than any other year would prove to be.

During that year the practitioners of the dominant school in these cities had a death rate in measles of 3 per cent.; the homeopathic profession lost 0.8 per cent. The mortality rate in scarlet fever was 9.24 per cent. for the dominant school; 5.66 per cent. for the homeopathic. The typhoid fever mortality was high for both schools, for the dominant school 22.56 per cent., for the homeopathic 15.15 per cent. These figures are duplicated wherever the two schools are brought in competition, as for instance in Cook County Hospital, Chicago, at the University of Michigan, the University of Iowa and the University of Minnesota.

Dr. Edwards, of this city, professor in North Western Medical College, in his 1907 book on practice, gives the allopathic mortality in pneumonia in private practice as 10 to 38 per cent., in hospitals 33 to 50 per cent., in asylums as from 50 to 100 per cent. Dr. Dewey, of Michigan University, is

authority for the statement that the homeopathic mortality, taking all these classes together is less than 6 per cent.

Not only is the death rate very much reduced by homeopathic prescribing, but also the average duration of the disease is shortened. This fact was shown by some figures prepared by the British government, whereby it was demonstrated that a homeopathic hospital at Melbourne, Australia, treated as many cases of typhoid fever as a hospital of the dominant school having twice as many beds.

It is useless to multiply figures ; they all lead to the same conclusion. The eminent Dr. Osler, recently called to Oxford College from Johns Hopkins University, admitted that the homeopathic school is at least the equal of his own when he said : "Nobody has ever claimed that the mortality among homeopathic practitioners was greater than those of the regular school." "But the homeopathic profession claims, and without fear of successful contradiction, that the mortality rate among its practitioners is far less than the mortality in the dominant school, and the duration of the disease much shorter.

SUBSTITUTION.

It is customary for the homeopathic physician to dispense his own medicines. This fact is sometimes put forward as an argument in the line of economy, for the employment of this school. There is an advantage in the practice greater than the saving in drug bills ; the physician himself becomes responsible for the purity and the accurate preparation of the remedy. Undoubtedly many a practitioner of the dominant school, depending upon the pharmacist for the proper filling of the prescription and trusting that it will fall into competent hands, suffers defeat in the struggle with disease

because of "substitution", careless or incompetent preparation, or delay in filling his prescription.

The *Medical Record* stated that a great number of Chicago apothecaries are liable to prosecution for selling adulterated drugs. This prominent journal of the dominant school, in the issue of Dec. 17, 1904, says : "Chemical tests have been made and evidence produced which proves the presence of alien matter in many prescriptions calling for pure drugs. In nearly 20 per cent. of the samples obtained there was not even a trace of the drug called for by the prescription. The tests, conducted by Dr. John A. Wesener, showed the following : 23 prescriptions, no trace of the drug called for ; 66 prescriptions, 80 per cent. impurities ; 10 prescriptions, 20 per cent. impurities ; 9 prescriptions, 10 per cent. impurities ; 31 prescriptions, pure." A similar scandal, involving New York City druggists, recently stirred the medical profession and the laity of that metropolis.

Besides avoiding the possibility of substitution there certainly is an advantage to the patient in having the remedy prepared on the spot and the directions regarding its use made clear by explanations of the physician himself. Many mistakes and many failures in medical practice have resulted from the indirect methods of the pharmacist and the brief, unsatisfactory directions written on the label of the medicine.

OPIATES.

While the homeopathic physician may admit the occasional necessity for prescribing medicines liable to induce drug habits, if continuously used, yet, as a matter of fact, this procedure is rare in his practice. On the other hand, there is no denying that the more careless of the practitioners of the dominant school have been responsible for the

development of such habits and have made inebriates of all too many patients.* While this criticism may perhaps apply to some individual members of the homeopathic profession, it cannot be passed upon the system itself, as, it is sad to say, may be done with the dominant school. This writer has no desire to say harsh, unkind, and above all else, untrue things of the other school, but it must be apparent that, with the greater wealth of remedies and the greater confidence in therapeutic effects, the homeopathic prescriber has far less temptation to resort to purely palliative methods of treatment. For these reasons he rarely employs the hypodermic syringe and as rarely administers anodynes of any sort. Of necessity, therefore, the victims of induced habits are seldom found in homeopathic families.

DOGMATISM IN MEDICINE.

The Journal of the American Medical Association is published in this city. In issue of Nov. 30th, 1907, in an editorial on "Dogmatism in medicine," is found this language:

* It is well known that chronic constipation results from the abuse of laxatives and cathartics, too commonly prescribed by physicians of the dominant school.

The recent action of the Philadelphia County Medical Society, in opening its ranks to all legally qualified reputable physicians who repudiate exclusive dogmas has not been received in the best temper by some officers of the local homeopathic organization, which has taken occasion to reiterate specifically by resolutions its faith in the exclusive laws of cure. It makes very little difference, however, whether the resolutions were passed or not. Only the progressive men in all schools are wanted for recognition, and such are coming over to rational medicine all the time and the worthiest element in the membership of the homeopathic medical profession will find its way, sooner or later, into less narrow and more scientific associations. The element in the laity to whom homeopathy is a sort of religion, is decreasing and will ultimately disappear, and with it the reason for the existence of the special homeopathic school.

It is, perhaps, had taste for a guest of the evening to find fault with one of the brilliant men of an entertaining profession. But this failure to appreciate the true mission of the homeopathic profession is due, in all probability, to mental confusion regarding all the features of the homeopathic doctrine. Admitting then, that the writer quoted is honest, though ignorant of our profession, you will excuse your speaker, he is sure, if he criticises this editorial and attempts briefly to state the facts involved.

The perpetuity and promulgation of Homeopathy are related to a greater question than the possible affiliation of our practitioners with "less narrow and more scientific associations," to quote the Chicago editor. Underlying the whole problem is a great sociological, humanitarian, yes, even a moral question. The homeopathic physician believes the application of *similia similibus curantur* offers suffering humanity a means of escape from pain, shortens the duration of human ailments, and promotes the longevity of the race. Believing this, would we be honest men, could we face humanity, could we stifle the accusations of conscience itself, if we failed in season and out of season, to impress upon the public the superiority of the homeopathic practice ? It is not because we fear the perpetuity of a natural law. We know a natural law will persist and continue to operate even though we neglect to talk about it, or seek to promulgate it. It is not because we fear our position as prophets of the cause may be assailed. It is on higher grounds than this that we take our stand. Love of humanity is more important to us than "less narrow and more scientific associations." The amenities of life, of course, are more attractive than the sacrifices. It is comfortable and delightful to be in the swim. But greater than these is the satisfaction of doing what we feel to be our duty to God's children.

It is conscientiously believed that the superiority of the homeopathic practice has been proven in every disease, in every climate and in every season. Yet it must not be imagined that the homeopathic physician looks askance upon the advances of general medicine. The sputum examination, for instance, in the diagnosis of throat and lung diseases, is given the same importance in the homeopathic world that it receives elsewhere. The most radical opponent of Homeopathy would not say that in the choice of a drug the presence or absence of the germ would influence his selection of a curative remedy. It would simply decide the question of climate or the general disposition of the patient. It means at least that much to the homeopathic prescriber. The laboratory methods of science receive the same patronage and the same encouragement in the homeopathic school as elsewhere. In surgery, in gynecology, in ophthalmology, the same careful technique, the same skill, the same methods are everywhere employed. No one dare claim that the results of surgery in other schools are superior to those gained by the homeopathic operator.

The American Institute of Homeopathy has officially decreed that "A homeopathic physician is one who adds to his knowledge of medicine a special knowledge of therapeutics. All that pertains to the great field of medicine is his by tradition, by inheritance, by right." The patient, therefore, who employs the homeopathic physician gives himself all that the dominant school offers and in addition, the wonderful resources of the homeopathic *Materia Medica*. He loses nothing except the greater probability of escaping surgical procedure by the saving grace of a more potent medical armament. He reduces his chance of mortality and decreases the duration of his illness. All that pertains to chemical methods, to bacteriological research, to surgical ideas, to the great field of general medicine—all these belong to the homeopathic physician to give to his patient, together with the possibilities of the homeopathic remedy. In the language of the Chicago Inter-Ocean editorial, truly "They who have not tried Homeopathy have not half tried to get well."

(*To be continued.*)

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THE INDIAN HOMEOPATHIC REVIEW.

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[No. 4.

TYPHOID FEVER.

Some time ago we had occasion to write about this disease in the pages of this journal. Today we wish to deal with the therapeutics of the malady, citing a few cases that have come across our experience in the last decade.

Lachesis comes to my mind first to-day because, as Nash very truly observed, it is the Sulphur of Typhoid. But then we must not forget Sulphur. It is here as in every other malady our eye-opener in many a case. The offensive nature of the discharges, the burning and the peculiar eruptions would lead to its use.

Belladonna is called for in the acute stage of the malady when the rush of blood is very great. The high temperature, the delirium, wanting to go home, wanting to run away would suggest its use. Throbbing carotids, violent headache, eyes injected, alternately drowsy and excited, are some of the other conditions.

Baptisia is a remedy that will do wonders at times. The peculiar delirium and the besotted expression with the fearfully offensive discharges would suggest its use in the

disease. Only lately I obtained excellent results in the case of a young boy ten years old. Generally there is a bad, offensive diarrhoea with it. Decomposed blood is sometimes passed with the stools.

Lachesis is our sheet anchor in hemorrhage. I will never forget how well it acted in the case of a young lady where nothing seemed to check the hemorrhage and where death seemed inevitable. A single dose of Lachesis 30 acted like a charm.

Carbo Veg. may sometimes be called for in the later stages of the malady where there is great difficulty of breathing with marked tympanitis. The abdomen seems to be filled with fluid and the patient wants to be fanned continually. These patients generally do not respond to medicine.

Lycopodium may be thought of in similar conditions, only the symptoms are not so alarming as with Carbo Veg. Lycopod. acts very well, if there is lung complication with it.

China is at times a very good remedy, particularly if the system has been depleted by hemorrhage, diarrhoea or any other cause. It is a great tonic and acts very well in many cases. A malarial basis makes China all the more indicated.

Arum Triph. does very well at times. If the characteristic boring of the finger-nails in the nostril is present, it will act like magic. I do not know what pathological significance it has but the symptoms are there and when given according to indication it acts like a charm.

Gelsemium is a remedy that vies with Belladonna and between the two comes Fer. Phos. In anæmic patients this will do wonders at times.

Muriatic Acid is another of our great sheet anchors. In the completely prostrated condition when the head slides down the pillow, you will think of this remedy, but you must look for the other symptoms also.

Nux Moschata is sometimes called for, particularly in hysterical patients. The tongue is fearfully dry and there is drowsiness and also tympanitis. Later in the course of the disease you may think of *Ant. Tart* and *Opium*.

Nux Vom. also we must not forget. Sedentary habits, a constipated condition, and particularly if there has been allopathic drugging before.

Rhustox, *Phosphoric Acid* and *Psorinum* are some of the other remedies that may be thought of also.

J. N. M.

WHAT IS HOMEOPATHY ?

(*Continued from page 96, No. 3, Vol. XVII, I. H. Review*)

CONCLUSION.

I have the feeling that a physician to truly succeed must be conscious of his high calling. To enter into the sacred precincts of the home, to come into intimate contact with the growth and development of the family, to deal with human life ; indeed, all the relations of the physician to his profession, make it necessary that he should be a man of the greatest good sense, of the highest character, of the widest culture, and of the tenderest heart. We read in holy writ that on one occasion, Moses, observing the burning bush, which burned and yet was not consumed, turned aside out of mere curiosity to inspect the great sight. He found himself in a sacred place. The voice of God calling to him from the midst of the bush, said : "Draw not nigh hither ; put off thy shoes from off thy feet, for the place whereon thou standest is holy ground." So, it seems to me that when a man enters the medical profession, he should take up his life's work in the manner demanded of Moses on this occasion, and in the same devout spirit that the priest of old entered the Holy of Holies.

This picture perhaps represents the ideal, but I believe Samuel

Hahnemann in every sense possessed the qualities which I have mentioned. The earnestness of his writings and many expressions from his pen indicate this. I am the fortunate possessor of a letter which Hahnemann wrote to one of his patients ; in this he mentions his dependence upon the God of Hosts and his reliance upon divine guidance in the practice of his profession. His description in the Organon of the ideal physician is undoubtedly an unconscious autobiography. The splendid dignity of the man, the self poise, the patience in tribulation, the modesty in success, the cool-headed judgment in the emergencies of practice, and, above all else, his abiding faith in the efficiency of medicine, all indicate that Hahnemann was indeed a physician whom every practitioner may well select as his ideal and his example.

In common with others here tonight, it has been my pleasure to journey to Switzerland and to pass a night on the Rigi. Next morning to the music of chattering teeth we climb to the observation tower and await the arrival of Old Sol. It requires a vivid imagination to make one's self believe he is on a mountain top and that far below him stretches out a wonderful landscape. In the fog and clouds, objects fifty feet away are indistinct. Directly, however, a rosy hue appears in the east. The clouds, rolling away form indistinct and grotesque images to startle our anxious eyes. The red light in the eastern sky stretches more and more widely across the horizon. An exclamation causes us to turn our backs on the expected sun and there ! Away off to the west, higher than the rest and first to catch the outriding rays of the approaching orb of day, is the Jungfrau ! She stands in appearance like molten gold, solitary in her grandeur, yet still the young bride adorned for her husband. As we gaze in breathless amazement at the supernal grandeur of the view, suddenly, away to the north, another mountain peak comes out of the clouds to give company to the first. One by one, like points of golden nails driven by the unseen hand of some mighty giant, come the mountain tops from the unrolling mists which hide the earth. Then as we turn to face the east, suddenly, with one mighty effort the sun forces its way above the

horizon and sends its golden beams in a flood of glorious light across the expectant world. Miles upon miles of the grandest scenery upon the globe are revealed to us. Green valleys, shimmering lakes, sparkling water-falls, rugged mountains, verdure-covered hills, dazzling snow peaks—a moment ago like gold from the fire—all these things in nature are now seen as God made them in the beauty of his handiwork.

In the world of knowledge, the traveller, prepared by proper study to appreciate and properly correlate the achievements of History, has before him a prospect more inspiring than any Alpine view. The sun of Medical Science for untold centuries was far below the horizon of human vision, and for many centuries more was obscured by the clouds of imperfect knowledge. Even when the rosy hue in the east indicated the near approach of the day of knowledge, the mists of materialism distorted verities into grotesque and misshapen shadows. But when the orb of truth shall have swept aside the last cloud of prejudice and revealed the scientific world as it truly is, among the mountain tops of greatness, like unto the glorious Jungfrau, dazzling in her beauty, there, the most attractive feature of the whole medical landscape, the first to intercept the rays of scientific therapeutics and the last to loose the eye of the honest critic, will stand forth Samuel Hahnemann, physician and scientist.

University of Michigan, Dec. 1907.

COLLAPSES AND REACTIONS.

By EDUARDO FORNIAS, M. D.

Philadelphia, Pa.

THE ever increasing biological and bacteriological researches with their long lists of bacteria, toxins, anticorps, aggre-sins, phagocytes, enzymes, etc., seem to have shaken up and transformed old school therapeutics to such a degree, that an universal clamor is constantly heard among its followers

imperatively demanding reform in the teaching of medicine, showing the unsteady and vacillating state of their once cherished theories and hobbies.

Prophylaxis and reform are the daily outcries of our leading opponents, and while the uneducated branch of their school is running riot with polypharmacy and daily applying the very means their teachers have openly rejected and condemned, another group is employed or hired out by pharmaceutical chemists to introduce and indorse, as a rule, the most extravagant and dangerous combinations of drugs ; all presented as the synthesis of assiduous labor and talent, and claiming results not sanctioned by experience, and which, if true, would relegate most of us to an ignominious grave and place therapeutics within the reach of the ignorant.

Fortunately, the evolution and phenomena of disease are well known, and while we can cultivate hygiene and prophylaxis with the same privilege and advantage as our detractors, with the single remedy and the small dose of the similar, we need not enter into the dark and intricate labyrinth where our friends are lost and where so far, judging by the result, little or nothing has been found of permanent and positive value.

No matter what the underlying causes of disease may be, collapse and reaction will remain always the expression of antagonistic nervous states, governing the road between recovery and death. Besides the well-known cardiac stimulants, enemata and intravenous infusions of normal salt solutions, homeopathy counts with the indicated remedy, which according to our law of cure, not once, but thousands of times, has aroused the reactionary forces of the system and re-established the necessary vital equilibrium for a successful issue.

In pathology we understand for reaction an act of resistance against any force whatever, hostile to the reparation and

recovery of diseased organs and tissues. It is an organic manifestation, which once developed by any cause whatever, tends to reject the morbid agent which has caused it. In other words, it is a sort of vital power or excitement, which leads to the rousing of the depressed organism and aids it to free itself from invading microbes, to neutralize or destroy the pathological effects of the malady and to co-operate efficaciously with the indicated remedy. It is certainly dependent on the organic instinctive forces of the economy.

Formerly this power of organic resistance or excitement was attributed to the *vis medicatrix naturæ*, but at the present time, after the discoveries of Metchnikoff, Behring and others, phagocytosis and other defences of the organism have come to engage our attention; at least, with respect to the resistance of the economy against infections and auto-infections.

These researches may all have great value, but, so far, we can independently assert that neither of them can alter or have altered in the least our faith in the law of similars; neither have they come to break up our therapeutic precepts. On the contrary, the results of repeated biological and chemical experiments reach us every day, confirming more and more the power and efficacy of our small doses. With strict individualization and the accurate selection of the remedy, I repeat, we continue to obtain, in all corners of the world, the brilliant results of always and neither the slander of hostile elements, nor the presumptions of assumed authority, or the sophistical and scholastic pedantry and slyness of university faculties, have been, or are potent enough to disturb, much less to check the unyielding course and progression of our school. • • •

Our detractors boast daily of wonderful things that have only an ephemeral existence and which we see soon replaced by others of equal future and importance. They claim that

we have done nothing for science, that we have not contributed in any way to the progress of medicine, that we remain passive spectators in the arena of medical knowledge, and all this while we enjoy the respect and patronage of the intelligent classes, who know well what they can expect of us, who get well and remain well, who pay their bills with gratitude, who reach old age and die exactly like other mortals, but who, above all, never become pharmacomaniacs. Do not typhoid fever, pneumonia, tuberculosis, and other infectious diseases keep on claiming their victims in increasing number every year ? Where is the therapeutic progress of the old school ? Why is the therapeutic arena so successfully and persistently invaded by surgery ? The death rate is the stigma of old school. Have we not contributed a system of therapeutics which admits of no change, and to which suffering humanity hangs on with persistence and devotion ; which will be in existence long after many of the present men and their fads and claims are gone and forgotten, which has outlived the defamation of bygone bigots, and which if nothing else, has been directly influential in correcting the shameful, medical abuses of even fifty years ago, such as blistering, cupping, bleeding and the application of blood-sucking worms ? And, finally, compare Hahnemann with his contemporaries, and see what have they to offer in therapeutics as immutable, as efficacious and as safe as the treatment of diseases by the single remedy and the minimum dose. What has become of the thousand theories and absurd propositions of the past ? Who would accept today the dictates of the conceited teachers of therapeutics of the early and middle part of the last century ?

Let us, however, digress from the offensive discussion and turn over to certain considerations of immediate relation with the subject of this paper.

In favorable cases of disease the reaction may be complete and terminate without being disturbed; or is incomplete and doubtful, when we observe the development of a multitude of intermediate phenomena between the attack and the cure; phenomena which always take a vacillating and dangerous course. Less frequently we notice states of excessive reactions, as in cholera Asiatica, which are of short duration, accompanied by intense fever, and usually terminate in a rapid cure; or may pass at once into a profound prostration of the nervous system; the cerebral cortex, with all its functions of perception, of motion, and of sensation, being lowered and blunted, sometimes nearly to abolition.

The reunion of systemic efforts to recover dynamic vitality, destroyed or lost under the influence of infectious and denutritive processes, cannot always be operative. Strength, energy and life, in each and every organ of the economy, are subjected to various causes of intrinsic and extrinsic origin, in which age, sex, previous state of health, idiosyncrasy, diet, fatigue, exposure and excesses of all kinds, have a notable influence. To rouse the organism from this functional torpor, called collapse, we need apart from the intervention of the nervous system, a reactionary agent, to work up, incite and aid reaction. This agent is the indicated remedy. But, to appreciate the relative value or quality of this medicinal agent, understand its operation, and know how to select it properly, it is necessary to bear in mind that while the human body is a collection of organs and parts, each organ and part has a special function to perform, in other words they contribute in attaining healthy action and vital equilibrium, but, individually, no organ or part possesses by itself the power to create life, motion or activity.

The heart, the lungs, the liver, the kidneys, the spleen, the stomach, the intestines, are all capable of utilizing transmitted

force, but, the nervous system only can elaborate vital force to be transmitted to these organs. Without this intimate dependence, these organs could not perform their especial functions, maintain physiological harmony, nor recover their normal integrity, when this has been compromised by disease. The nervous system confers vigor and harmony to all the organs of the body, guides and stimulates them during disease, and presides over all their functions ; hence, all our therapeutic efforts should be directed to this centre of life, if we wish to recuperate the lost functional equilibrium, work up reaction and obtain complete recovery.

"Life is a mixture of reation and collapse, the first being the opposite pole to the second. Collapse is the sudden and complete prostration of the vital forces, or the depression of the cerebral energy ; differing from adynamia by the promptness with which it supervenes. Health may be appreciated by varying balance of both poles. In disease the body is sometimes successively under the influence of collapse and reaction, as per example, in cholera. 'Collapse and reaction are the expression of antagonistic nervous states ; in the former there is no energy, in the latter there is a luxurious waste of energy in every direction ; collapse is an example of inhibition or sheer exhaustion.' When reaction takes place, the bits, which retained the molecular operation of the nerves, give way under the recuperative impulse, and, as a consequence, the vital functions outrun their energy and recover the normal state.

"When we examine carefully a state of collpse, we find the bulk of the blood in the portal system and nervous system ; the skin is empty of blood, pale, cold, clammy ; this is very evident in the pinched, drawn face. The temperature is generally below the normal ; the pulse is small, feeble, varies in rate and the respiration is shallow, slow,

frequently sighing. The pulse, respiration and the occurrence of hiccough, mausea and vomiting, clearly show the disturbance of the vagus. The vasomotor centres are paralyzed, as seen in the empty arteries and skin. The extreme prostration explains the exhaustion of the motor centres. The dimness of sight and the noises in the ears show that the visual and auditory centres are deranged. The cerebral cortex or chief seat of the mind may be intact or may be disturbed as evinced by the partial or complete loss of consciousness."

Syncope is slight collapse, often attended with loss of consciousness, due to actual failure of the heart, to which the collapse signs must be attributed. The symptoms of reaction are hot, red skin ; full, bounding, frequent pulse, and round portly face ; the breathing is deep and frequent, the very opposite of collapse. The blood tension is high and the veins are well-emptied, containing as little blood as possible.

Under the influence of our remedies, we see frequently reaction take place, especially in acute diseases and in constitutions not broken down by previous illness, or by excesses of every kind. Even in organisms in which anemia and catabolic changes have left deep impressions ; when the cells seem to have lost the power to convert nutritive material into protoplasm, even in those cases, I repeat, reaction occurs, and it occurs, sometimes, when the state of the patient would lead one to expect a fatal end. It supervenes, occasionally, as a prelude of approaching death, so tenacious is the energy of the vital forces.

In a practice of over thirty years, I have observed similar results in all classes of toxemias and infectious fevers, in perforation of the viscera, active hemorrhages, and other serious organic lesions as well as in violent mental emotions, shock and painful traumatism.

The principal object of the treatment is to restore the function of the heart and its vessels, particularly so in cases of serious traumatism, complicated or not by fracture and extensive lacerations. In such cases, success often depends on the promptitude with which we act. The first important measures are : dorsal decubitus, the external application of heat, the arrest of hemorrhages and the administration of cardiac stimulants (ammonia, cognac, coffee, hot milk, etc.)

In septic or infectious fevers, as in other ailments or reduced vitality, frequently the result of reflex inhibition, in which all the nervous functions are affected, we have to depend, almost exclusively on our remedies, though in some well-known cases, the enemata of warm normal saline solution, hypodermoclysis, and intravenous saline transfusions, are efficacious means. In many cases of shock or severe hemorrhages, we cannot dispense with hypodermic injections of sulphate of strychnia (1-30 grain) every ten or fifteen minutes, until we inject it three times, and if cold sweat exists combine the strychnine with atropine (1-100 of a grain).

The massage of the heart in syncope due to chloroform-narcosis has been recommended as a substitute for artificial respiration, subcutaneous injections of ether, and rhythmical tractions of the tongue, which have not always proved efficacious ; but direct massage through the thoracic route or through the diaphragmatic, has not given positive results. The only track which seems to have answered well to surgical designs, is the sub-diaphragmatic, easily followed when the abdominal cavity is laid open for operation.

I pass now to analyse the therapeutic agents with which homeopathy counts to stimulate the depressed vital energies of the system, and aid the reactionary process of the same, and in doing so, it is well to bear in mind, that not all the

cases of functional torpor, with defective reaction, are attended by actual collapse.

In the first rank we should place Sulphur and Carbo Veg., two important remedies to combat lack of reaction. The clinical history of both is a credit to the law of similars. Sulphur corresponds to those cases of defective reaction, in which the debilitated cells do not respond to the action of the best indicated remedies, and in which the exhaustion of the vital forces has not reached the state of genuine collapse. It is in such cases where we see this drug rouse most efficaciously the dormant energies of the system and prepare the soil for a reaction which itself may determine, or which other remedies may come to ultimate. Its action then, is complimentary or intermedial. This stimulating property of Sulphur is easily understood if we remember that it is our great antipsoric, and that it has a profound action on the abdominal venous circulation (abdominal plethora, portal obstruction, visceral congestions, etc.)

Carbo Veg. on the other hand is principally indicated in states of advanced collapse, where, we know, the prostration, algidity and cyanosis are extreme, the pulse is filiform or nearly imperceptible and the body is bathed with a glacial clammy sweat. In all conditions of extreme adynamia with defective hematosiis and prevailing torpor of all the functions, no remedy can replace this drug to arouse the system from the utter prostration often observed in infectious diseases of serious character; and consequently it becomes our anchor of salvation in many cases of typhoid, yellow, or septic fevers, in which the lowering of the forces and collapse suddenly supervene. Carbo veg. seems to have marked affinity for the abdominal viscera, and is not less efficacious in respiratory troubles (emphysema, bronchiectasis, bronchorrhœa), which are accompanied by a progressive flagging of the powers,

cyanosis, circulatory failure, paroxysmal dyspnea, and reactionary torpors, especially in broken down constitutions, or in the aged, with bronchial dilatation.

In the typhoid state, which sometimes supervenes during the course of low infectious fevers, of malignant character, or the result of auto-infection, we have also Phosphoric Acid, and Muriatic Acid, which, though in a lesser degree than Carbo Veg., have the power to urge the depressed forces of the organism and bring about reaction:

In Phosphoric Acid the sinking of the forces and exhaustion are not as profound as in Carbo Veg. but the sensorial depression is intense. The patient is sunk in a state of stupid apathy, as if insensible to all external impressions, but reacts momentarily under the influence of active urging, to fall readily back to his previous stupor. It seems as if the reactionary powers were sufficient to spur but not operate a complete reaction. Under this drug the visual and auditory centres are deeply affected and the sopor is attended by a muttering delirium.

Muriatic Acid is as depressing as Carbo Veg., for in both the functional torpor, exhaustion and collapse, are extreme. The former, however, exhibits, in its decubitus, a certain degree of erethism, not to be found in the latter, which corresponds to the most perfect type of stupor and collapse and where the disturbance of the cerebral cortex reaches its highest degree of intensity, as evinced by the almost complete loss of consciousness. Frinks considers Muriatic Acid applicable to erethistic conditions too severe for Bryonia, too asthenic for Rhus-Tox, and not cerebral enough for Belladonna, but after Carbo Veg. I reckon Muriatic Acid the most asthenic, and among the ataxo-adynamic, the one most depressing to the nervous centres. Its dorsal decubitus, as said above, exhibits, notwithstanding the adynamia.

and stupor, a certain amount of irritability, but in a more inferior grade than in either *Rhus Tox* or *Arsenicum*. Its prostration amounts to paresis, with privation of the senses, and motion is limited to a sliding down of the body towards the foot of the bed, in which, of course, the will does not intervene in the least, so extreme is the state of physical and moral impotency. Putridity, together with the disorders of motion and sensation, reveal an intense gravity, and are the leading characteristics of this remedy.

Helleborus Niger is another important remedy, comparable with *Muriatic Acid*. It is also indicated in the most severe adynamic conditions, with lack of reaction, especially in those cases in which the centres are so perverted that they do not seem to respond to any stimulus. The privation of the senses, the abolition of the will, are complete; the look is vague, the expression stupid, the pupils dilated; the nostrils are sooty, the pulse nearly imperceptible, the muscles convulsed, the urine retained, and crushed down by toxemia, the body, as in *Muriatic Acid*, slides to the foot of the bed, incapable of the least effort to change the distressing position. The suppression of the urine has been my leading indication in yellow fever and typhus at the beginning of my practice, but I shall always consider it inferior to *Carbo Veg.* to urge the nearly extinguished powers of the system.

Other varieties of functional topor, daily met with in practice, may claim employment of other remedies; for instance, *hyoscyamus*, whose pathogenesis plainly reveals its ataxo-adynamic power, especially when the lack of co-ordination translates itself by ~~patho~~ motor impulses of an impudic and lascivious character. In two cases of ataxo-adynamic typhoid, with manifestations of erotic irritability, this remedy, in my hand, brought about prompt reaction. The asthenic delirium, with its vivid imaginations and illusions, the ~~con~~

pulsive motion and torpor of the entire organism, have led to its employment in cerebral typhus. In the retention or even suppression of urine of flow adynamic states it shares honors with Helleborus. The loss of consciousness and of the functions of the special senses, is sometimes complete ; at other times, the functional torpor is attended by erotic exhibition of extravagant affections for the opposite sex, or by displays of unchaste and lascivious acts. (Emotional insanity). In the typhoid state, calling for Hyoscyamus, the patient, like in Phosphoric Acid, lies in the supine position, in profound stupor, as if the intelligence and sensibility were suppressed, but momentarily reacts when called or spoken to, to fall back again into his previous state of stupor. Another important indication of this drug is the state of irritability or hyperesthesia of the motor nerves, as shown by the convulsive movement of the limbs, the subsultus tendinum, the agitation of the hands and feet, which supervene in the midst of the most extreme prostration ; a state which corresponds with the sensorial excitement (insomnia, delirium, mania) and which contrasts with the depression of the cerebral cortex (partial or complete loss of consciousness). It is likewise indicated when the visual and auditory centres are affected (dimness of sight, contraction of the pupils, optical illusions, tinnitus aurium, deafness). It competes with Lachesis and Hydrocyanic Acid in the syncopal state, which is a collapse of lesser intensity.

Hydrocyanic Acid, like Laurocerasus, contains prussic acid, and both have been employed with gratifying results not only in cardiac syncope, but in the threatening asphyxia of capillary bronchitis and other pulmonary affections. The rapid sinking of the forces with long-lasting faints and lack of energy or vital reaction, is its leading characteristic ; particularly so, in pulmonary or cardiac troubles, when the

respiratory centre in the medulla becomes debilitated and the motor nerves are almost paralyzed. Its action upon the blood and heart makes it further applicable to serious cases of typhoid fever and cholera Asiatica. In cholera Asiatica, it should be studied when anguish and dyspnea prevail: the drinks pass with a gurgling sound, the diarrhœa and cramps cease, the vomiting diminishes, the urine is suppressed, and a glacial coldness, with gradual extinction of the pulse, complete the dangerous picture. When the urine is suppressed Hydrocyanic Acid compares favorably with Opium, Camphora and Helleborus. It has also given good results in many suffocative attacks of laryngeal phthisis, when asphyxia seemed impending. In a case of diaphragmatic paralysis, after diphtheria, a few doses of the 3c sufficed me to bring about an incontestable recovery.

A much neglected remedy, in conditions of reactionary torpor, is Opium which like Sulphur, serves to stir up the dormant or depressed energies of the system, and make them react when other remedies apparently indicated proved ineffectual. The privation of the general sensibility, with slow or defective reaction, is a condition of functional torpor, upon which both remedies seem to have an almost specific action. The prostration of Opium is similar to that of Veratrum; in both the syncopal paroxysms are repeated on the least motion, but in the former they are followed by a certain amount of reaction after lying down or assuming the state of repose, while in the latter the cold sweats and anguish continue for some time and then cease, to return again if the patient rises from bed, or makes a sudden motion. In other words, in Veratrum the depressed feeling continues after assuming the supine posture, the other symptoms are relieved. but the least motion brings back the syncope, with its alarming and fatal features. Long-lasting fainting spells are

characteristic of Hydrocyanic Acid. In syncopal, apoplectic, or typhoid states, with cyanosis, drowsiness, coma, stertorous breathing, dropping of the lower jaw, and suppression of urine, Opium frequently brings about surprising reactions. As in Helleborus, it is indicated when the suppression of the urine is a prominent symptom. The determining causes of many of the ailments in which Opium has proved curative, comprise fright, alcoholism, and old age; but the lack of impressibility to medicinal or reactionary powers is one of its most notable features.

In Lachesis we have another therapeutic agent of considerable efficacy, against those typhoid and asystolic conditions characterized by paroxysms of dyspnea and syncope. The lowering of the vital forces comes on suddenly; there is loss of sensibility and motion, the face is pale and sunken, the body is bathed in cold sweat, the pulse is intermittent, tremulous, almost imperceptible and there is lack of reaction. In valvular disease of the heart, with erratic palpitations, stitching pain, anxiety, dyspnea, fainting spells and cold sweat it has been productive of good results, and the same may be said, in those attacks of cardiac asthma, so full of distress, inquietude, and apprehension, and which are always aggravated by lying down. It has also been employed with success in abdominal disease (appendicitis, septic peritonitis, infectious salpingitis, etc.) with prevailing dyspnea and syncope, in which there is an extreme sensitiveness to touch. The prostration of Lachesis is not attended by the vascular and nervous erethism of Arsenicum, nor the death like asthenia of Carbo Veg.; it occupies an intermediate position between the two. Both Lachesis and Opium can combat cerebral paralysis, when the dropping of the lower jaw is the prelude of impending danger. When syncope is of cardiac-asthenic origin Lachesis should be compared

with Arsenic, Hydrocyanic Acid, Digitalis, Veratrum and Camphora.

An essential remedy is also Phosphorus, particularly in typhoid or asystolic states, during the course of pneumonia and broncho-pneumonia, with dilatation or fatty degeneration of the heart; or in adynamic conditions of phthisis, with repeated hemoptysis, stertorous breathing, frequent fainting spells cold sweats and threatening paralysis of the lungs. Phosphorus is to tuberculosis what Sulphur is to scrofulosis. According to Trinks, the same relation which exists between Arsenicum and Rhus Tox, exists between Phosphorus and Phosphoric Acid. Phosphorus takes the first place in the most intense forms of functional torpor, particularly in the ataxo-adynamic form of depression, with impending paralysis of either the brain or lungs. This is the position which Wurm and Kaspar give to Carbo Veg., which I consider inadmissible for Phosphorus is an erethistic remedy with a rapid transition to torpor, but always exhibiting an asthenic irritability, inferior only to that of Arsenicum. The physical or nervous prostration indicative of this drug is produced by a prolonged exposure to active morbid influences. Syncope is frequent and sudden, with more or less reaction, or the patient falls into a comatose state, as if life were extinguished. We should not forget the curative power of this remedy in apoplexy and its immediate consequences, particularly in old age. Like Antimonium Tartaricum, it is often indicated in pneumo-typhus and pulmonary edema, with much rattling of mucus, intense dyspnea, and great prostration of the forces; cases in which Moscus comes often to complete the cure. For the typhoid state, which sometimes supervenes during acute atrophy of the liver, few remedies can take the place of Phosphorus.

In those incomplete reactions, which leave behind an

accentuated muscular asthenia, Gelsemium is the first remedy to consult. Its favorable action, in such cases, has been constantly verified, particularly after grip and other infectious fevers. This drug affects especially the motor nerves, causing prolonged exhaustion of the forces, with a marked disinclination to all bodily and mental effort. The muscles refuse to do their work and feel notably sore ; and this is a condition which frequently indicates Gelsemium in certain early cases of typhoid fever, exhibiting mental, corporal and vascular excitability, with languor, insomnia, vertigo, drowsiness and an agitation less marked than that of Aconite.

There are other cases of incomplete and doubtful reaction, usually noticed after acute suppurative diseases, or prolonged and debilitating losses of blood and other vital fluids (hemorrhages, sweats, diarrhœa, etc) for which China is a very important remedy, especially when these losses cause an extreme general debility, with emaciation and indefinite state of malaise. China is also our leading remedy, when the patient after repeated attacks of acute malaria, falls into a state of cachexia, which is due to the anemia, and in a great measure to the persistency of certain alterations of hepatic or intestinal origin. It is, likewise, indicated in those cases in which the intestinal mucosa remains so impressible that the least excess in the regimen, brings a return of the diarrhœa and even of the complete attack, with its usual consequence, and creating besides painful digestive troubles of long duration.

If, as it happens occasionally, the reaction is excessive, that is, is accompanied by an intense febrile excitement with congested face and conjunctiva, tumultuous beating of the heart, full frequent pulse, violent headache, somnolence, and a slight nightly delirium, Aconitum is the adaptable remedy for this condition, which is essentially a fever of reaction ;

true enough, with active congestion of the brain and a mild cerebral disturbance, but without any pathological change whatever. Under the influence of this remedy the circulation returns to its normal course, the congestion disappears, there are no ulterior localizations, and the malady retrocedes with enough rapidity and passes to complete recovery, coinciding always with an abundant elimination of urine, the development of a rash, or profuse sweating. When reaction does not take place, secondary disorders appear, the existing congestions persist and increase more and more, and the typhoid state finally supervenes; for this so-called excessive reaction, usually, is nothing else but the prelude of serious disorders. Aconitum is also a powerful auxiliary against syncopal and asphyxic states supervening after insolation (*coup de soleil*), or after being for a long time exposed to an intense heat, and it is not less efficacious when syncope or collapse is the result of shock or traumatism, particularly when fear and anxiety persist after the accident. It is also applicable to shock after surgical operations and its adaptation to traumatic neurasthenia, is absolute, when the muscular debility is accompanied by numbness of the limbs, and by a mental syndrome, comprising fright, anxiety and fear, especially agoraphobia.

For the attacks of cholera, or pernicious fever, where the sudden sinking of the forces, is so commonly observed, we count with three remedies, which, by themselves alone, are sufficient to maintain intact the credit of our school. These remedies are : Arsenicum, Camphora and Veratrum, and to the list we can advantageously add Cuprum, whose clinical history is intimately connected with that of the three.

Arsenicum is indicated in those cases distinguished not only by a rapid sinking of the forces and deterioration of the organic substance, but also by the nervous and vascular

erethism. The predominant erethism and the colliquative losses, keep *pari passu* with the cardiac debility and collapse, but, no matter how profound the collapse apparently may be, it is always attended by the characteristic asthenic irritability which we frequently see persist, until reaction is effected or death closes the scene. A glacial sweat, cyanosis, the lack or scantiness of the excretions, the almost complete extinction of the pulse, voice and forces and the alteration of the face always indicate a fatal issue, which perhaps only *Carbo Veg.* can prevent. Of all our remedies *Arsenicum* is the most ataxo-adynamic, for even in the most extreme cases of prostration and sensorial torpor, it always exhibits the same agitation and mental inquietude, which compels the patient to change place, any be continually on the go, without, however, obtaining any rest or relief. In the most adynamic typhoid states, when the function of perception, motion and sensation are blunted or seem extinct, the least trace of irritability of tissues invariably indicates *Arsenicum* a remedy which has often proved curative, in those attacks of sudden collapse, asystolic or not, occurring at night and attended by irritability and anguish.

In *Veratrum album* the rapid sinking of the forces is accompanied by cold sweats, filiform pulse, pinched countenance, repeated spells of fainting and pertinacious hiccough; but its distinctive characteristics are the alidity and the cold sweat on the forehead. Its influence on the vital forces, in what concerns the sensorium and the nerves of animal life, is moderate, but it profoundly affects nutrition. The digestive organs take part in the passage of tissue-material from a higher to a lower plane of complexity, the secretory function is altered, the nausea and vomiting become accentuated and the alvine evacuations, riziform or *Scrementoid* (Koch), explain the destructive metabolism.

Vomiting and diarrhoea increase the exhaustion, but the patient does not exhibit either the mental or sensorial disturbance, or the anxiety and agitation so characteristic of Arsenicum. However, in certain typhoid states, especially of septic peritonitis, I have observed a degree of anxiety and inquietude inferior to that of Arsenicum, but sufficiently indicative of Veratrum, when the sudden prostration is attended by constipation, frequent small pulse, alteration of the features, and principally by vomiting, successively bilious, greenish and porsaceous.

In cases of cholera Asiatica which commence with collapse, Camphora is our best remedy, but in those in which the collapse supervenes 12 or 24 hours after the attack, we find Arsenicum and Veratrum more frequently indicated. Camphor corresponds almost exclusively to that variety of cholera called cholera sicca, in which diarrhoea and vomiting are either moderate, or entirely wanting. Thirst, if it exist, is insignificant, but as in Arsenicum, anxiety and agitation govern the scene. It is in this class of cases, where Camphor administered in the mother tincture, a couple of drops every 15 minutes has brought about the most admirable reactions. We should bear in mind, however, that when not indicated or given in too strong and repeated doses, it produces a burning, epigastric distress, which puts the patient in despair and which, according to Carroll Dunham, a few doses of Phosphorus will relieve.

Cuprum is for spasmodic cholera, what Camphora is for cholera sicca. In both, however, the thirst is moderate and stools scanty, but in Cuprum, the cramps predominate, and usually occur in spells, and while the urine becomes suppressed, the cyanosis and dyspnea increase. It is also indicated in many cases of functional torpor with defective reaction, particularly when prostration supervenes as a result of

Inflammatory and spasmodic troubles, of gastro-enteric of abdominal origin, or occur in broken-down individuals from excess of physical or mental work, or from prolonged nocturnal watching. The results obtained with this remedy, in many cases of retrocession of rashes, have been very satisfactory. If to the retrocession of the rash we add the spasms and vomiting, and these are followed by cyanosis, dyspnea and extreme prostration, no remedy better than *Cuprum Metallicum*, will spur the reactionary forces of the system.

In the reactionary torpor noticed, now and then, in the malignant type of eruptive fevers, *Zincum Metallicum* is an indispensable remedy, especially when the stupor precedes or accompanies the rash, which develops slowly, retrocedes, or fails to appear in due time. In such cases, as in the typhoid state which may accompany them, when there is impending paralysis of the brain and the spasmodic element is notable, we have to resort again to this remedy. It is, in fact, one of our most valuable drugs to combat the ravages of septic intoxication in the nervous centres, made evident by the extreme exhaustion, alidity, cyanosis, and alteration of the features. Attacks of syncope, with general dullness and distressing nausea are also indicative of *Zincum*. In all serious affection of slow, interrupted or incomplete development, as the result of enervation, we should study this remedy, which, as Farrington says, is indicated when the patient is too exhausted to develop the morbid phenomena pertaining to the disease, and suffers in consequence the effects of a latent toxemia, which expends its forces in the internal organs and principally in the brain. A similar state of nervous torpor is sometimes observed during dentition, when the intracerebral and spasmodic phenomena may be important enough to demand the employment of *Zincum*.

I think this work would be incomplete without mentioning a few other remedies, which have been recommended and employed during the doubtful and incomplete reactions of many acute maladies, or in retarded convalescence, when the exhausted forces seem to be incapable of restoring to the system its lost integrity.

Psorinum is indicated when there is reactionary inertia, after severe diseases, especially when convalescence is protracted, without known cause and the patient is weak and nervous, and despairs of recovery ; or when, in a sickly constitution, we suspect the existence of a latent toxic influence, such as tubercle, scrofula or psora. It may become a valuable remedy when the dystrophic condition has been preceded by the retrocession of a rash. Like Sulphur it serves to stimulate the dormant energies of the system and the enervated cells, bringing about the needed reaction, when other remedies have failed to produce permanent improvement.

In certain typhoid states, with sensorial depression, Hahnemann prescribed successfully Nitri Spiritus Dulcis, a few drops of the pure substance, in half a glass of water every two or three hours, until reaction took place. It corresponds to those cases too mild for Phosphoric Acid, without nervous and vascular erethism, in which also the patient can be momentarily aroused to fall back again into deep stupor. Spiritus nitrosi seems to correct the destructive metabolism, probable cause of the reactionary inertia, as evinced by the increased renal elimination, and the diminution of urea and the solids.

Cocculus Indicus has also been recommended for those cases of incomplete reaction, in troubles of spinal origin, exacerbated by prolonged night watching or insomnia, and which are accompanied by lassitude, vertigo and persistent anemia. In typhoid states, of exclusively nervous type, in

If the cerebro-spinal nervous system cannot get rid of the toxic effect, *Cocculus* will aid readily the reactive forces of the system. Wurm recommends it in those cases where the animal life or of relation is deeply affected, while the nutritive functions are hardly implicated.

Arnica is one of our powerful agents, when syncope or collapse is the result of serious mechanical lesions. or attended by cerebral congestion, with cold, pale face, vertigo and loss of consciousness. It is always indicated in traumatic fevers, with great depression of the vital forces, and which are due to an accidental contusion or shock, complicated or not with fractures or lacerations.

Capsicum is of useful application, and has given good results in those cases of functional torpor, occurring in obese individuals. of lax fibre, gouty or hemorrhoidal with enlarged and tender liver and spleen; and particularly so, in those who suffer from malarial cachexia with periodical spells of fainting and great inclination to lie down and sleep.

A remedy of some importance in syncope, is *Secale Cornutum*. especially when it occurs as the result of persistent hemorrhages, during labor, with algidity and loss of consciousness, in debilitated cachectic women. Also in the collapse of cholera Asiatica, with convulsive movements of the muscles, glacial coldness, and almost complete extinction of the pulse and voice.

In a case of brusque asystolia, with precordial anxiety, distressing nausea and deathly paleness of the face, I obtained a rapid and excellent result from *Tabacum*, which is also indicated in collapse, when the tremor and pallor are extreme, and nausea and vomiting return on the least motion of the body.

Valeriana and *Ambra Grisea* have been favorably mentioned, for incomplete reaction during the course of nervous

affections, when the organism seems not to respond to the action of any indicated remedy ; but, I think, Moschus should be preferred when the enervation is extreme and the malady does not follow its usual course, either remaining stationary, or developing serious abnormal phenomena. This remedy is also useful, during or after serious fever, presenting repeated attacks of syncope, with gradual lowering of the pulse ; audible mucous rattling and nervous inquietude, indicating impending paralysis of the lungs. The lack of reaction, when it occurs in hysterical women, during serious illness however, claims the employment of Castoreum, a neglected remedy, worthy of our study in these cases, particularly, if due to spasmodic disorders and extreme exhaustion, convalescence is protracted and distressing. Asthenic irritability and predominance of abdominal symptoms are characteristics of this drug.

And in finishing this paper, I wish to state that I have found Lycopodium able to operate true and permanent reactions, particularly so, in typhoid states, with pulmonary localization. I do sincerely believe that many cases of reactionary inertia, erroneously classified and mal-treated pneumonias, have been successfully treated with Lycopodium by virtue of its profound action on destructive metabolism and its undeniable power to urge the enervated cells to act and bring about reaction.

In the collapse of old age and vigorous gouty subjects, Colchicum should not be overlooked, especially in typhoid states with incomplete stupor, or in astyolic conditions with great oppression and dyspnea.

IS MEDICINE OF VALUE IN THE MODERN TREATMENT OF TUBERCULOSIS ?*

BY GEORGE N. LAPHAM, M. D., RUTLAND, MASS.

In the modern treatment of pulmonary tuberculosis so much stress is laid on the importance of fresh air, nourishing food, cold baths and other necessary factors, in the treatment, that the value of medicinal treatment is almost lost sight of. In fact, a great many physicians tell their patients that medicine is of no use in the disease ; that all they need to do to effect a cure is to go to the country, eat plenty of nourishing food, keep in the open air as much as possible, and nature will do the rest. Important as are all these measures and necessary as it often is to urge upon the patient the necessity of their careful observation, he naturally gets the impression that the physician's services are no longer needed ; that the nature cure is all sufficient, and he is perfectly competent to prescribe for himself what he ought to do, or not to do. And herein lies a possible danger to the patient and frequent disappointment to the physician. The importance of a constant and corrective supervision of a physician is overlooked. He is far more competent to judge as to how much exercise a patient should take, how much and when he should be allowed deep breathing, when entire rest should be enforced and numerous other details in which he needs to be carefully directed to obtain the best results. A change of environment to favorable conditions, together with the hygienic measures and careful supervision, will in nearly every case be followed by improvement, but furthermore we believe that the demonstration of the indicated remedy will be correcting unfavorable symptoms, hasten the patient's recovery. There are a fortunate few of these incipient cases that seem to run an uneventful course, presenting no

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symptoms worth mentioning or where the fresh air treatment alone will suffice. But the large majority manifest some constitutional weakness or a certain train of symptoms that call for medical treatment, such as frequently recurring pleurisy, tendency to blood spitting, indigestion, and a hundred and one other secondary symptoms that can often be corrected by medicine only.

At the Massachusetts State Sanatorium we have the exceptional opportunity of watching the effect of all forms of treatment in incipient phthisis, as the homoeopathic school is there given an equal opportunity with the old school of treatment of cases.

Clinical observation affords us a basis for the opinion that the treatment according to the law of similia has shown on the whole fully as satisfactory results—as the so-called “regular” treatment. Of course it is often difficult to determine just how much credit to give to the action of drugs administered to patients following out the hygienic treatment. How would this or that case have gotten along without any medicine is a question that often suggests itself and of course in any individual case is difficult to answer.

But I submit that when cases that have before entrance shown a persistent train of symptoms, that continue after entrance, but upon the administration of medicinal agents these symptoms show marked improvement, we may then feel justified in attributing the favorable result to the action of the drug. It is on the basis of hundreds of such cases that we have day by day increasing confidence in homeopathic medication in tuberculosis.

We can roughly divide the symptoms presented in incipient tuberculosis into primary and secondary, the primary symptoms being those produced by the disease itself and the secondary symptoms those due to the disturbance of

other organs or parts of the body not directly resulting from the tubercular process. Far more favorable results may be obtained in treating these secondary symptoms. The most common of the primary symptoms are cough and expectoration. The cough in the early stage of the disease is usually of a dry and hacking character accompanied by little or no expectoration. It is due to local irritation in the affected lung, although often referable by the patient to the larynx or trachea. In this stage there is often considerable relief from the administration of the indicated remedy. In the more advanced stage of the disease when there is more secretion in the bronchi or necrotic material from the broken down tubercles, the cough results from effort to expel this material from the lungs. A cough of this character is very persistent and difficult to treat and must continue until this waste matter is removed. Occasionally such remedies as Antimonium iodide, Ipecac and Tartar emetic when indicated will soften the cough and render it easier for the patient to raise.

As secondary symptoms may appear, gastric disturbances, nervous manifestations, catarrhal affections of the nose and throat, rheumatism, and cardiac, renal or other functional disturbances. These can logically be treated only as independent conditions and with fully as much success as in non-tubercular patients.

What advantages then are there in administering the homeopathic remedy over other forms of treatment?

1. The homeopathic remedy can be given in a certain train of symptoms to correct them, while "regular" treatment at best is confined to general applications, general tonics or the attempt to counteract one or two important symptoms; instead of treating the totality of symptoms.

2. Functional disturbances cannot follow the administration of the homeopathic remedy. It is, at least, something to

our credit to do the patient no harm. On the other hand even in these days of rational treatment, very many cases present themselves that have impaired digestion, and otherwise show ill effects undeniably due to the over-use or too constant use of Kreosote, coal tar derivatives, etc., in the attempt to tone up the system or reduce temperatures.

3. The results, when obtained are usually definite. The symptoms treated are promptly ameliorated or entirely disappear, and when this has been reached the medicine can be discontinued or changed to suit other symptoms.

4. The patient takes the least amount of medicine necessary to obtain the desired results. His digestive system is not burdend with tonics, alteratives, emulsions etc., but is left free to digest and assimilate plenty of nutritious food, the best tonic and the only internal tonic the patient needs.

5. In institutions the comparatively slight cost is an important item. This is readily seem when we compare the cost of the constantly increasing number of new drugs and combinations placed on the market by large pharmaceutical firms. These expensive preparations so highly praised in advertisements, are usually used a few times and then discarded for something new.

There is a more or less prevalent idea that a person suffering from pulmonary tuberculosis is less susceptible to minute doses of medicine than non-tubercular patients, presumably on the assumption that the toxins of the disease exert a counteracting affect. I do not belive this to be true. Indeed, the peculiar susceptibility of some people to very small doses is just as apparent as in other diseases. Adjuvants can and should always be employed where it will help the patient. Massage, local applications, hydrotherapy and electricity all may be helpful, for the mental and moral as well as physical effect.

By adhering to homœopathic prescribing in these cases, we not only get satisfactory results but we avoid the temptation to use the many proprietary preparations, many of which in their announcements, by implication if not by direct statement, are claimed as practical panaceas for the disease. Their name is legion. It is surprising to find what a large proportion of patients have been previously taking these proprietary remedies, trying first one and then another (and very often on doctor's prescription) to get "built up." Very likely many of these preparations are excellent, in that they may contain drugs desirable in certain conditions, but the uncertainty of such haphazard prescribing, to say nothing of the great expense to patients who can ill afford it, brings out in marked contrast the rational method aimed at in homœopathic prescribing. Granted the results we desire are not always obtained, we are nevertheless following consistently on fundamental rule, the only law of therapeutics ever enunciated. The results so far have been satisfactory, but individual opinions are not conclusive. A larger clinical experience and increasing number of cases treated, can be the only evidence of value as to whether or not the therapeutic law of Hahnemann is more successful than any other treatment.

All physicians will gladly welcome and use any specific for tuberculosis, if such a thing is ever discovered, and proven of real value in the treatment. But until that time shall arrive, the only medical treatment of value that we can give our tubercular patients must be symptomatic and I believe we may confidently feel that at least in incipient cases, that after we have put the patient under the best conditions possible and see to it that he is following out the prescribed rules of hygienic living, the homœopathic treatment will in most cases be all he will need in the line of internal medication.

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অর-চিকিৎসা ১ম ভাগ (২য় সংস্করণ), মূল্য ১, ডাঃ বাঃ ১/০। এই ২য় ভাগ (২য় সংস্করণ) মূল্য ১, ডাঃ বাঃ ১/০। এই ৩য় ভাগ (১ম সংস্করণ), মূল্য ১, ডাঃ বাঃ ১/০। এই ৪র্থ ভাগ (বহুভাগ)। জ্যোতির্বিজ্ঞান—১ম ভাগ, মূল্য ১০, ডাঃ বাঃ ১/০; এই ২য় ভাগ (বহুভাগ)। সরল চিকিৎসা (২য় সংস্করণ), মূল্য ৬, ডাঃ বাঃ ১/০। শিশু-চিকিৎসা (২য় সংস্করণ—বহুভাগ)। ওলাউঠা চিকিৎসা (৪র্থ সংস্করণ), মূল্য ১/০, ডাঃ বাঃ ১/০। বৃহৎ গৃহচিকিৎসা (বহুভাগ)।

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সরল গৃহ-চিকিৎসা।

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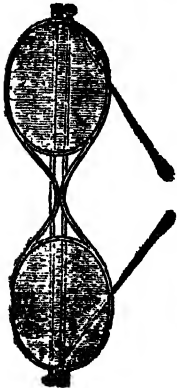
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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XVII.]

MAY 15, 1908.

[No. 5.]

HAHNEMANN'S BIRTH DAY.

The 10th of April is an auspicious day with the homeopaths of Calcutta as the birth day of Hahnemann. This year the homeopathic fraternity gathered together at the residence of Dr. D. N. Ray to do honor to the memory of our master Samuel Hahnemann.⁴ It was cheering to see so many homeopathic physicians in one place and made one feel that homeopathy is not dying out in India.

It was indeed true that we missed the cheering appearance of the pioneers of our cause such as the late lamented Drs. Mahendra Lal Sircar, Behari Lal Bhaduri, Leopold Salzer and others, who have all gone to their rest now after doing their duty—But their work can never be forgotten.

The host of the evening was present every where and was all attention to the guests. Among those present we noticed Drs. P. C. Majumdar, Chandra Sekhar Kali, Netai Charan Haldar, W. Younan S. K. Rose, G. L. Gupta, S. Goswami, S. K. Nag, T. Palit, R. M. Banerjee, N. N. Sett, B. B. Mukherjee, B. B. Chatterjee &c. &c.

Dr. P. C. Majumdar was seen chatting long with the younger members of the profession and seemed quite happy over it. His words are always instructive and interesting. Dr. Kali with his bare

body and his dhoti and chaddar looked quite venerable and was very happy over it. His young boy who was with him seemed to enjoy the evening as much as the rest of them. Dr Netai Charan was seen among the musicians and seemed to have been enjoying the music very much. Our jovial friend Dr. Gupta was very much in evidence every where. It was just like him. Another gentleman who seemed to be quite happy on the occasion was Dr. Kunja Lal Mullick. Every body present seemed to enjoy the meeting much. Some of the elder members stayed long. The guests were all entertained with music and light refreshments. Some of the songs in the gramophone as selected by Dr. Roy's young boy was very much appreciated.

J. N. M.

PREGNANCY WITH CHOLERA.

Pregnancy complicates cases of cholera to a serious extent. Whenever we have the occasion to see a case of cholera in a pregnant woman our prognosis becomes guarded, sometimes we have to pronounce even fatal results.

In the beginning the case seems to be a simple case of cholera. Gradually the patient's strength suffers and the disease becomes serious, some new symptoms and complications make their appearance. We cannot say that pregnant state has any tendency to increase the susceptibility to the attack of cholera, but when it actually takes place dangers are naturally apprehended. Even in favorable cases the convalescence becomes so tedious and complicated that patients friends and relations entertain no hope of her perfect recovery.

We have often had so many occasions to come across such cases that we think it necessary to relate a few cases

here. But before doing that we must say a few words about the various conjectures put forward by medical men and the lay public.

Some observe that in the pregnant state naturally the albumen of urine is increased and that gives an increased stimulus to the attack of cholera. On one occasion we have been attending a pregnant woman with a severe type of cholera, An allopathic doctor was there and he made the above remark. It is a pure assumption that albumen is increased in pregnancy. We know in some cases it is the fact and that often leads to puerperal convulsion and so forth. In some cases we had the urine analysed and no albumen was found.

It has been said that in pregnant state blood is deteriorated in various ways and that is the cause of cholera attack in pregnant woman. This is an assertion without any foundation in fact. When subject to the influence of the exciting causes of cholera pregnant and non-pregnant women get it in the same degree and proportion.

Case I. We were called to see a case of a lady about 32 years of age, of robust frame of body, Primipara at Sham-bazar. She was pregnant at the time about 9th month. Purging and vomiting continued the whole day and when we arrived there she had strong spasms of the extremities and some on the side of the chest.

There was no pulse at the wrist and the heart beat was very feeble. The body was bathed in cold perspiration. There was considerable thirst and restlessness.

We gave her a few doses of Cuprum met. 30 every hour as long as cramps and restlessness persisted. To give her plenty of cold water to drink was our strong advice as she was denied that want.

Four hours after we were called again and found her much better. The cramps of the extremities subsided and

thirst and restlessness considerably less. The pulse at the wrist was feebly perceptible and coldness of surface much less. We noticed a speedy reaction. A few doses of placebo were given every two hours. In the evening we were summoned in haste. We now found her in extreme agony and restlessness. On enquiry we learned that there was pain in the abdomen-acrampy and bearing down sensation. Considering abortion imminent we gave her a few doses of *Secale cor.* 30 every hour and gave the relative a grave prognosis if abortion actually take place.

After midnight she gave birth to a full grown and live baby. Her condition became very serious, complete collapse and some difficulty of breathing and copious sweat all over. *Carbo veg.* 30 and 200 was given without any benefit. In the early morning about 4 A.M. she was almost dying. We gave a dose of *China* 30 and sat down to watch the effect.

The action of *china* was marvelous. In an hour's time reaction appeared to set in. Perspiration stopped and pulse appeared. She opened her eyes and wanted to drink water which was given in plenty. She recovered her strength and made a perfect though tardy convalescence.

Case II. A young lady of eighteen summers, robust, primipara, pregnant eight months, had an attack of cholera 30th June 1902. Purging and vomiting with severe cramps in the extremities continued for over twelve hours when I was called to see her. There was no pulse and the whole body was bathed in cold perspiration. *Veratrum album* and *cuprum met.* 6 were given regularly by another homeopathic physician. It had the effect of checking the frequent evacuations but there was no improvement in the general condition of the patient.

I gave her *Carbo veg.* 30 every two hours and in six hours pulse was better and perspiration disappeared. Abdominal

distention however was not gone and the patient complained of difficulty in breathing and bearing down pain and hiccup.

Nux vom. 30 relieved her to a great extent. There was certain amount of restlessness and a great deal of thirst remaining. Placebo four globules every two hours. She was doing very well and wanted to eat something. As there was no urine all food was denied her. I was suddenly called in the evening and on reaching the house I saw her gasping for breath.

Hydrocyanic acid 6 however brought her round ; it was being given every half hour. I waited at the patient's house about three hours. She slept very well for two hours and made water freely after a waking from her sleep. I gave her barley water with little salt and lemon juice mixed. She was convalescing slowly but steadily.

Case III. A lady about thirty, belonging to a very rich family, thin, emaciated looking but otherwise healthy came under my treatment for an attack of cholera on the 6th April 1908.

Pulse very thin, great restlessness, very great cramps in the extremities, considerable thirst, Purging and vomiting of rice water stools continued but less in quantity. No pain in abdomen, Cuprum met. 30 every 3 hours.

She was much better the next day. cramps almost disappeared and thirst reduced. Placebo one dose every 6 hours.

The patient was almost all right in the morning. In the afternoon I heard that she had bearing down pain in abdomen. I also learned then that she was pregnant three months at that time. Pain increased in severity and abortion took place in the evening. The hoemorrhage was not very copious. Next morning pulse though thready was feverish and she was delirious. Bryonia 30th three doses had very

little effect. At night delirium increased and *Hyoscyamus* 200 one dose was given.

No delirium today and the patient was conscious but in evening slight fever, restlessness and much thirst ; *Rhus.* 200 one dose on the 12th April, the patient was free from all complaints except that she was very weak, so much so that could not raise her hands and move on her side. There was slight sleepiness and apathetic condition. *Phos. acid* 30 two doses.

Better in every respects, placebo. On the 15th April I saw her last and she was in a convalescent state. Very slow recovery took place.

In a very simple case of cholera during pregnancy under my care, when she was progressing very favorably she had suddenly had dyspnoea and she died before I reached there. This is most probably from embolism of the heart. It is not very rare however as we know another instance when a young man had a very severe attack of cholera, when he was almost cured and convalescent, the doctor was dismissed and every thing went on right. A sudden attack of dyspnoea occurred and death took place in a very short time. When the doctor returned he found the patient a corpse.

Dr. Salzer in his excellent book cholera referred to this symptom and he thought it was due to embolism of the heart. He suggested *Calc. ars.* to be given immediately.

ENLARGEMENT OF PROSTATE GLAND.

We meet with this condition of the prostate gland very frequently and it is the cause of much disturbance in the functions of urination. The allopathic doctors always use catheter and advise the patients to undergo an operation without which they have no remedy for the disease.

In homoeopathy, however, we have several remedies for the cure of this condition and we have been often successful. It is therefore for the convenience of our readers that we are going to write something about it, in the hope that it will help our practitioners to decide the proper remedy.

The enlargement of the prostate is neither partial or complete. Sometime the one lobe of the organ is enlarged and the other remains in its natural state.

This condition is generally found in old age, when a partial or complete stoppage of urine takes place.

On examination per rectum we find the enlarged gland and on introducing a catheter into the urethra we find some more or less obstruction in its prostatic portion. There is frequently difficulty in urinating, which some times possible only in a stooping posture with legs spread asunder. Dribbling of urine and frequent discharge of prostatic fluid during stools are also noticeable. The form of alvine discharges is often flat or irregular instead of being cylindrical. Old age, as we said above, is particularly subject to chronic enlargement of this gland.

TREATMENT.

Pulsat.—Frequent desire to urinate, stitches in the neck of the bladder, after micturition spasmodic pain in the bladder, extending to the pelvis and thighs; feces flat, and small in size.

Thuja.—Syphilitic or sycotic patient, badly treated gonorrhoea stitches in the urithra from behind.

Digitalis.—Senile hypertrophy of prostate, heart is affected. Fruitless effort to urinate throbbing pain in the neck of the bladder. Considerable straining in making water only a few drops passed.

Causticum.—Pulsation in perinium; burning sensation and pain in neck of the bladder, spasms in rectum and removed desire. Paralytic state of the bladder.

Lycopod.—In old people and dyspeptics. Pressing in the perinum near the anus during and after urination. Stitches in the neck of the bladder.

Selenium.—Whole sitting and walking a drop of mixed fluid presses out of the urethra, sensation peculiar before and after stools.

Copaiva.—Urine emitted by drops. Apis.—Frequent desire and pressing and throbbing in urethra.

MATERIA MEDICA.

The nosodes are generally used by many practitioners of homoeopathy with the idea, that they are useful in the cases of disease from which they are derived. As for instance syphilin in cases of syphilitic diseases, Medorrhinum for gonorrheal cases, Psorinum for the bad effect of itch. If we are to consider these nosodes as remedial agents to cure sickness, we are to prove them upon healthy human system and thus establish their true homoeopathic relations.

We know from experience both clinical and pathogenetic, that they often produce and cure symptoms similar to those arising from the diseases from which they are derived. Thus in the provings of syphilinum we often get symptoms of syphilis. Tuberculin for instance is thus used in tubercular phthisis but not in every case. In those cases in which symptoms correspond to that from proving. When it is used in all cases of phthisis failure is the result. The best advice therefore to use nosodes, is to give it according to the symptoms in proving. Tuberculinum :—Dr. R. F. Rubé, of Newyork city gives us a beautiful comparison of this remedy with other remedies of our materia medica. He thus describes Tuberculinum.

"Tuberculinum is many times a chronic of Pulsatilla, and resembles the latter in its amelioration from cold open air. Many of its symptoms are also aggravated in the evening. At this time the hoarseness even to aphonia, showing marked laryngial involvement, increases with much oppression of the chest. This is like Phosphorus, but Lucifer does not take kindly to the cold open air; a point most valuable in differentiation. Stomach pains in tuberculosis are most atrocious, being burning, cutting and rending in character and greatly increased by the ingestion of even the blandest food. Cold things are often craved; in this the remedy resembles Phosphorus again, as well as the deathly sinking sensation at the stomach, which is agonising in the extreme and causes the patient to sigh deeply for relief, as though trying to fill the void by inhaling more oxygen. Food if retained, relieves this sensation, but usually excites pain and prompt emesis. Tuberculinum patient will, even in midwinter, lie thinly covered with the cold air sweeping over her. Cannot seem to get enough cold air and is greatly refreshed by it. The fever comes on or increases towards evening and at night, with decided hectic flush on the cheeks. In the extremities many pains are found, tearing in nature, compelling the patient to shift his position for relief, of course Rhustox suggests itself. The finger tips became painful as if supurating, though nothing is to be seen. Humid or wet weather aggravates the suffering of tuberculinum patient, especially the catarrhal and pulmonary symptoms. The nose becomes obstructed and large tough greenish pieces of mucus are discharged.

In this phase is shown its close relationship with many of the antipsoric, whose action it most ably supplements. Mentally the patient is peevish, irritable, impatient and restless for changes, wants now this, now that. The bowels are often obstinately constipated with tympanitic distention of the abdomen, and soreness, of its walls.

Much and more might be said of this great antipsoric, for such in truth, it is; enough has been mentioned to suggest its sphere of remedial activity and usefulness. To give it for the disease, tuberculosis, is folly unrestrained; to prescribe it for patients manifesting

similar symptoms of tuberculosis or of any other disease is homœopathic wisdom, conservatively employed."

From these remarks our readers have no difficulty in deciding the true sphere of the action of Tuberculinum. The last sentences of the docter convey the true meaning of what we said above with regard to the administration of nosodes in cases of disease.

Kali Phosphoricum, is a grand remedy in suitable cases. Unfortunately it is not often used even if indicated. The sharp shooting pains in supra-orbital region are relieved by gentle pressure and rubbing, while the occipital soreness is aggravated by pressure. Along with these symptoms, if the patient is irritable and excited the cure is certain.

In Amenorrhia Kali Phosph. symptoms are constant, dull headache, get drowsy all day, cross and irritable, cries easily so fidgety she could not control herself. It is useful in cases of nervous dyspepsia. Nausea soon after eating, accompanied by marked drowsiness. Eructations putrid both to taste and smell, relieved by nausea. Growing pains and fullness of stomach in the afternoon.

It is recommended in neurasthenia with following symptoms. Dull heavy headache in the occiput, drowsy yet restless, dyspeptic symptoms and complete exhaustion, especially after excitement of body and mind.

In sexual sphere its action is well marked. Nervous and depressed from sexual excess, aching pain in the sacrum, dull headache, great despondency, frequent micturition, the quantity is large and loaded with increased phosphatic deposits.

This kind of cases are frequently met with in practice. Among young and ardent students in our colleges and schools such conditions often occur.

It is useful in cases of bronchitic asthma, profuse expectoration of greenish or, yellowish sputa great emaciation, bowels constipated and poor appetite.

"The patients for which Kali Phos will be most useful will be adults of both sexes of nervous temperament"

"The cause of their trouble will be excitement, overwork and especially, worry.

A CASE OF SCROFULOUS KNEE JOINT WITH CONTRACTION OF MUSCLES OF LOCOMATION.*

COLLEAGUES,

This is a very important record of a case which apparently belongs to the surgeons rather than classed in the domain of medicine. This case gave me a good deal of trouble in many ways so I will give you a full record of every thing pertaining to the case and thus crave your indulgence.

A young tall and spare built youngman came under my treatment from Eastern Bengal. His father is in the service of that Govt. and could not accompany him to Calcutta. His mother came and took me to see him. Both father and mother are healthy.

When I first examined him, he was thin anemic, very much emaciated with a contraction of right thigh upon his leg nearly at right angles. The contracted part was hard and immovable, any attempt on extention or flexion caused intense pain on the affected limb. The right limb seemed to me a little atrophied, at least it was a commencing emaciation. The muscles around were flabby and without firmness.

There were great many constitutional symptoms present. Generally slight fever every afternoon, no chill or rigor but burning over whole body, thirst for small quantities of water, copious perspiration.

At the end of the fever great prostration, ravenous appetite and tendency to sleepiness, pains in the limbs increased considerably during feverish accession and subsided at the

* Read at the Calcutta Homeopathic Society.

end of the fever. Digestion faulty, considerable wind in the stomach and constipation.

Urine loaded with phosphates and voided frequently. Quantity not very large. Slight burning in urination. Mind peevish and irritable, sometimes despair of recovery.

He was constitutionally weak from the early days of his life. No gonorrhœa, syphilis or any other venereal disease. On considering all his symptoms I gave him a dose of *Arsenic Iod.* 30 morning and evening for four days. Usual food he was allowed only spices and hot things interdicted. He was better for many days, fever was almost gone and was improving in every respects.

I first prescribed for him on the 30th of November 1906, and the remedy acted splendidly at once.

On the 15th Decr. I was called and he complained of pain in the lower angle of right scapula and slight cough which was dry and teasing. I was told that he exposed himself in the night air one day and that gave rise to cough and pain in chest. *Bryonia* 30 and the pain was almost gone.

21 Decr. complained of pain in the limbs; urine loaded and burning.

Causticum 200 one dose.

There was a severe shock of earth quake at that time and the patient had to be removed from the place in severe cold weather and in torrents of rain. This caused a great aggravation of all his symptoms. Intense pain in the affected limb and more or less pain over the whole body, fever was increased to a high temperature, constant urination, urine was highly loaded with phosphates, mucus and pus, region of the bladder sensitive. In fact the patient was in utter agony.

A few doses of *Arnica* 30 were given to no effect. Burning in urination was extreme and constant micturition. *Cantharis* and *Merc. sol* were tried without benefit.

At this stage of the case, the mother of the patient consulted an eminent surgeon of the Medical College Hospital who advised an immediate operation and if it is delayed more than twenty four hours, he said the patients life will be in danger, she asked her husbands permission but he wired her to depend on me till he came in a few days.

On the 21st Decr. I administered a dose of Causticum, C. M. and the effect was marvellous. At this juncture I forget to tell you gentleman that I had to resort to the advice of my son, your hony. secretary upon whom the patients mother had great confidence. I called him in consultation and he advised me to give Causticum in a still higher potency.

From the next day the patient was convalescent. All his sufferings disappeared and strange to say that his affected limb which remained useless for more than three months resumed its work somewhat. Our patient's father came in at this time and thanked us for what had been done and wanted to take him to his place which is a sanitarium. I allowed him the privilege. He wanted some medicines also and a big quantity of placebos were supplied.

When there I sent him a few powders of calc. c. 200 to be taken occasionally. This was given because he was subject to cold and catarrh and also with an idea that he was a scrofulous patient.

This gentleman, is the hasty record of a very important case. The eminent surgeon who was consulted, I told you, expressed an opinion to the mother that how a limb, which had undergone such pathological changes could be rectified by medicine. It is needless to say that he spoke in derision about the efficacy of homoeopathic medicines.

I regret to say that many of our homoeopathic physicians entertain the same views. They don't know or care to know what a homoeopathic indicated remedy can do.

I must tell you here that the patient was so much pleased with his recovery and the perfect use of his limb that he could not forbear sending me his photos at the last Xmas season as a present to me and my son. I hand over to you the photos. When I was in Dargeeling just this season, one of my daughters was coming down to Calcutta. By chance a lady was ushered in her compartment and when she talked to my daughter and learnt that she was my daughter the lady exclaimed that your father saved my son from the very verge of death. This is indeed charming!

SECOND CASE.

I have another case which I am going to narrate to you. This is a very simple case but interesting in this sense, that such simple cases when injudiciously treated generally terminate fatally.

It is a case of an elderly gentleman living about 25 miles west of Calcutta. He is a tall and robust looking person. He had an attack of malarious fever in Octr. 1906 and suffered off and on from it.

He is a staunch homœopath, keeps homeopathic books and medicines, and treat himself with various medicines from the beginning. Failing with his own doctoring, he placed himself under an allopath who dosed him with big quantities of quinine and other medicines. These had no effect.

He came down to Calcutta and placed himself under my treatment. He used to get slight feverish heat in the evening with burning of hands and feet, slight or no chill and no thirst, at the end of the fever very light perspiration.

Bowels obstinately constipated occasional stools of hard brown balls. Appetite poor, sickish feeling during fever dry hacking cough, sometimes slight expectoration of white, sticky sputa passed with great effort.

Cough increased at night and on going to bed.

Ipecac 30 morning and evening for six days had some effect. Cough and sickish feeling had abated but the fever was as usual. Bowels constipated. He felt very weak, could not walk about freely. He was a great walker before.

Nux vom. 200 one dose followed by placebo.

Not much improvement, on the contrary cough again became troublesome. On the 20th December 1906. I gave him a dose of Bacillinum 200 and it had the desired effect.

There was no cough the next day to speak of and the burning of hands and feet gone. He wanted to know the name of the medicine, which I had to refuse. He wanted to go home and asked me to supply him with a big quantity of it to take with him I gave him a vial of placebo globules to be taken every morning.

After two months I heard from him that he recovered perfectly and gained strength.

This case, I am sure would have terminated in consumption and ultimate death. He is now hale and hearty.

P. C. MAJUMDAR M. D.

HOMEOPATHY AND SURGERY.*

Now adays people so frequently have recourse to surgical measures and it had so often seemed to me to be useless nay worse than useless, i. e. decidedly injurious, that I consider it quite opportune to narrate here the experience with a few so called surgical cases treated with homeopathic remedies. It is well that I should mention here that surgery has its place and there are cases where medicinal treatment is of no avail. Another point that should be borne in mind is that all sores should be regularly cleaned and dressed even when under

* Read at the Calcutta Homeopathic Society.

homeopathic treatment. Surgical asepsis is absolutely necessary even though we do not believe in surgical antiseptics. It has been claimed by some that the indicated remedy will do all and there is absolutely no necessity of dressings, douches &c. I am afraid I must beg to disagree with this argument absolutely. A few cases to the point.

B. D. B.—A gentleman about 40 years of age came under my treatment for multiple abscesses which I considered to be nothing more than a few mangoe boils as they are ordinarily called and as we find them so frequently in this country in the summer. I might mention here that this gentleman was a thorough believer in homeopathy and for a period of 8 years I had been their family physician and during this period none but a homeopath had been called in any case of disease in the family, so that it is needless to say that I took the best care of the patient from the beginning. It should also be mentioned here that the gentleman was slightly diabetic and there was a distinct trace of sugar in his urine, moreover he was a man of sedantary habits. At this time heat was intense in Calcutta and I found that some of the boils had a tendency to form into sinuses. The openings were small, a great deal of pus would accumulate in these boils. Every morning all the boils were regularly washed and all the pus let out. Mercurious, Hepar S., Silicea, Calc. ars., Lycopod., Sarsaparilla and Arnica were tried in different potencies but in spite of all the patient seemed to be getting from bad to worse. At this time I found out that the wife of the patient was in the habit of applying many ointments and salves &c, as recommended by friends and neighbours, in her anxiety to cure her husband quickly. 'I must say that this sort of interference with the treatment is very prejudicial' and it was amply verified in this case. However I continued with the treatment. But gradually the patient

began to develop symptoms of pyemia. He began having slow fever with chills and became quite cachectic looking. There was marked icterus and the skin became very much discoloured.

Lachesis, Pyrogen, Bell, Acon. and other remedies were tried but all in vain. One thing however remained a constant irritating factor, that is I could not dissuade the wife from applying various ointments, which she was of opinion, were very curative and healing and which she would not give up for any thing. Thus I lost one of my best patients, and my faith in our remedies was very much shaken at the time, as the patient had been in my hands from the beginning to end. I might mention here that I had the benefit of the advice of some of the best men in the course of treatment. But my faith in the dispensation of Providence always remains unshaken and I learnt a great lesson from this experience as will be seen from the next case.

II. Sham Lal—an up country lad about 16 years of age, came under my treatment just about the time that patient No. 1 died.

He had an abscess in the iliac region that had been opened three times and the attending physician having wanted to open it again we were called in. The whole of the iliac region, about 6 inches in all sides was full of sinuses. On applying a little pressure a quantity of grumous pus came out and the boy began groaning and moaning, was considerably reduced in general health and it was with great diffidence that I took up his treatment. I had the wound thoroughly washed out with boiled water and had it dressed with olive oil and sterilized cotton, at the beginning twice a day and afterwards once. I tried Sulph. for sometime and then I gave Hepar S., Calc. ars., Calc. Carb. and

Calc. Phos. but without much effect. He had constant fever and the emaciated condition of his system began to alarm me. Finally I gave him Bacill. 200 and this had a wonderful effect. The fever left him and the wound began to heal up nicely and in about a fortnight's time he made a beautiful recovery but it was sometime before he could walk, the inguinal region being very sensitive and the knee fearfully weak. Unlike the other patient this boy abided by our decision religiously.

III. This was a case of carbuncle in the back in a gentleman from East Bengal. It was about 8 inches long and quite two inches deep. There was profuse discharge of bloody pus and the patient was a diabetic. I tried Hepar s., Calendula, Silica, Calc. Phos., Phos. acid &c. in this case, but the remedy that eventually cured the patient was Lachesis. Aggravation after sleep was the symptom that led to the use of the drug, of course there were other symptoms also.

IV. Rani—wife of the master of the above patient. Was naturally recommended by the preceding patient when she developed a sore in the right side which was declared to be of a carbuncular nature by the local civil surgeon. Hep. S. cured this case. This was not a very serious case, but she was a substantial patient and she made good the loss suffered in attending the other patient who was poor man.

V. This was a case of erysipelas of the arm. From a small pimple in the hand the whole arm had become erysipelatosus and the brain was somewhat affected when I went to the patient's place about a hundred miles away from Calcutta. He had high fever and the pulse was weak, quick and intermittent. The outlook was bad all round.

Arsenic was my sheet anchor in this case. After several doses of the lower potencies, a single dose of the 200th

brought about a complete change in the patient, and I left him after three days on a fair way towards recovery. He is a hale and hearty man of sixty to-day.

VI. Mrs. B—an elderly lady was attacked with a curbnucle on the back. I was summoned to attend on her. When I arrived I found her in a very bad condition. But in two day's time her condition improved somewhat and she was brought down to Calcutta to be under our close observation constantly until her recovery. Here she continued well for two days when she was advised by a very near and dear relative of which there are generally many in Calcutta to try some eminent alopaths as the progress under homeopathic treatment was very slow, and I regret to have to state that they made very quick work of my patient and she died within 12 hours of the operation.

VII. Some years ago I had occasion to treat an elderly gentleman suffering from gangrene of the scrotum. The whole of the epidemics was decomposed and on the third day when I was washing the parts, the whole thing became detached and the two testes were denuded of all covering. This state of affairs really frightened me. However I kept bandaging the parts with calendula oil and he had silicea 30 internally and in about a months time he recovered completely. The integument from the sides got adhered to the testes and gradually enveloped the testes, leaving a certain white patch at the bottom. I had two other cases of the same nature as the above.

VIII. B. S. had gangrene of the scrotum that was under my treatment for nearly six weeks when the wound healed and the patient recovered his former health.

IX. This was the case of a young Mohamadan gentleman who had an abscess in the scrotum which was opened

three times and ultimately developed into gangrene when I was summoned. The patient lived in an out of the way place near Tarkeswar and I had no end of trouble in getting there.

With Lachesis and Pyrogen he made wonderful progress and in about 3 weeks time he was all right.

With these few cases I must beg leave of you as our time is limited, otherwise I could repeat many more cases where surgical interference was not only uncalled for but was decidedly injurious.

J. N. MAJUMDAR M. D.

Clinical Cases.

About four years ago I was called to see a pleader at Jessore. I found him raving incoherently. Though he was well acquainted with me he did not recognize me. His eyes were red. His face was flushed. The veins on his shaven head were perceptibly swollen and the right half of the head was very hot. He would some times lie quietly for a minute or two and then start up with loud cries. would try to strike his attendants and scratch and bite them. There was along with it a sort of *sardonic grin*. He was very talkative, sometimes very violent. All along he was complaining of great pain in the head specially in the right half. His left arm and leg were weak and he could move them with difficulty. There was pain all over the body. At night the pains increased and he became more talkative and violent and raved so loudly that neighbours were unable to sleep. He had constipation, stools dry and hard balls, after three or four days repeated doses of purgative and then only with the aid of cying. He was being treated by the

Civil Surgeon and two assistant surgeons for more than a fortnight. They were not able to do any thing for him.

I got the following history of the case :—About a year ago he lost his wife on the *shivarattri day*, and he seemed to have been seriously affected by the grief. Since then he has been suffering from meloncholia, never indulging in any pleasure or mixing in any company. He was constantly brooding over the misfortune and used to drink frequently to forget it. Just a year after on *the day on which* his wife had died he was invited by one of his friends who personally took him to his own house.

It was reported that there he had taken a large quantity of wine and had been weeping all the time moaning over the loss of his beloved wife on *that very day one year* before. He went from thence to another friends house and drank more wine and smoked hemp afterwards. From thence he was brought home by two men as he could not stand on his own legs without support. These men after knocking at the door went away as soon as they heard the sounds of the withdrawing of the bolts and he fell flat on the floor and received a shock on the head. His servant rushed out at the sound and lifted up his master who had lost his consciousness by the fall as the servant supposed. Then the doctors were called and ice was applied on the head and other medicines were given to restore him to consciousness. But with the revival of his senses he began to rave like a madman.

At the time when I went to see him I found it was very difficult to make him take any medicine. He said that they were trying to poison him. He was very suspicious even about the food and drink that was given him.

Taking all the facts into consideration I gave Lachesis 30. one dose that day. The patient seemed to have had

some sleep that night. But the relief was claimed by a kaviraj, due to certain oil he said he had applied without my knowledge. On which I stopped the medicine next day and the oil only was applied on the head. At night there was the usual aggravation. There was no sleep, raving very violent and all the sight of the little improvement of the preceding day disappeared on the next.

Now without a doubt the improvement was due to Lachesis and it was given from the next day. The patient calmed gradually down. There was very little raving and hurried talking, no fear, trying to jump from the bed and run away. The patient could stand and walk a few steps without falling and the eyes were clearer. But there was no further improvement after the third day, when Lachesis 200, was given after a dose of Sulp. 200. Again there was some improvement. Lachesis C. M. was given finally. This gave him back his senses at certain times when he could talk coherently and recognize his friends. But then at night the heat of the head used to aggravate with thirst and then he would relapse into delirium. This was removed by Arnica 200. when I saw the patient, there were no ecchymoses or swelling due to the fall. I prescribed Arnica according to the symptoms of the case.

In the incoherency of his talk he would urge that he has been ill only for four or five days instead of 25 days and that his house in his native village was only a mile from Jessore but which was in fact 24 or 35 miles from there, so this illusion of time and space must have been due to hemp smoking. I gave him Can. ind. C. M. one dose. After a couple of days he had no trouble. He has been doing his work in the court for the last four years and is all right from that time.

About the middle of April last I was called to see a lady at Jessore, wife of a civil court peshkar.

I found her lying on her back and moving constantly and at intervals crying out loudly when sometimes she would try to get up or lash her head against the pillow ; the hands were clenched spasmodically. When the pain became intolerable would get into hysterical fits with general opisthotonic movements of the limbs. The body would however sometimes bend backwards like a bow. She had fever, skin was dry and hot with occasional spells of sweating. There was pain in the head and the teeth and also in the mamma. She had formerly constipation but owing to repeated use of douche of drastic purgatives she had got dysentery and in addition to the ovarian pains she was then suffering from dysenteric pains near the vertical region with pains over the liver and spleen. She used to get fever every after-noon. The pain used to begin at 10 or 11 A. M. and gradually reached its height at night. There was formerly prolapsus of the uterus, cervix tumefied, moreover there was a sort of ichorous leucorrhic discharge. The uterus was enlarged. She was under the treatment of the civil medical officer and the lady doctor of the place who after a months treatment declared the case as incurable without surgical operation and advised her husband to take her to Calcutta for that.

At Calcutta some 4 of the leading lady doctors and another eminent doctor of the old school treated her for some time, but they wanted to perform the operation from the begining saying that there was no medicine for the disease.

However the lady having an intense horror for operation Dr. Majumder was called. He gave sepia 30 which reduced the prolapsus and there was no perceptible enlargement and the inflammation of the cervix was less.

But being poor people they were unable to continue

their treatment at Calcutta and came back to Jessore, where again she was placed under the old school treatment. But the pains came back with redoubled violence and there being no prolapsus at that time they could not account for the pain. At this time she got dysentery for reasons stated before. She was now placed under a native Homeopathic physician who placed her in a warm tub giving internal homeopathic remedies at the sametime. But the pains went on increasing till she began getting into violent hysteric fits.

At this time I was called to see her. I found her suffering from intense pain over the ovarian region beginning from the right ovary went towards the left and then it travelled to the creast of the ileum (left) and thence towards the spin. A part of the pain seemed to run from the right ovary towards the cervix uterii. There was a constant dull aching pain and a shooting lancinating pain coming on at intervals when the aching also increased. On feeling I found that there was a sort of hard round something felt over the ovarian regions. Their surfaces were uneven and were slightly movable. They were extremely sevsitive. I was therefore led to believe that she had at first ovaritis and now there were tumours there over both of them. At first I thought of Dr. Majumdar's Sepia and gave her one dose of Sepia 200. No improvement followed in two days. though discharge was stopped.

Then I gave her Graphitis C. M. This stopped the fits on the next day there being only one and after that there was none. The ovarian pains were no more. But dysenteric pains were causing her much trouble. A few doses of Calc. fluor. 200 removed that. She is now perfectly well. Calc. fluor. also removed the dull pain over the ovaries.

THE CALCUTTA HOMEOPATHIC SOCIETY.

This Society has been in existence more than two years now and in its way it has done much good work. Before this Society was founded, there was another society in Calcutta called the Hahnemann Society which used to meet once a year on Hahnemann's Birthday and of which the late Dr. Mahendra Lal Sircar was the life President. Some very able papers were read in this society and it also served another purpose namely the commemoration of the birthday of Hahnemann.

But with the advance of time and the increase in the number of patients and doctors in the city and suburbs it was thought necessary to start a society that would meet oftener and do some substantial progressive work. Hence, this society was started, and we are proud to be able to state that it has done signal service to the cause of Homeopathy. Our practitioners in the neighbourhood of Calcutta take quite a lively interest in it and find it quite instructive.

From its temporary abode in the rooms of Messers. Lahiri & Co. it has now moved into permanent quarters at 24-2 Cornwallis Street, Calcutta.

The meetings are held regularly every month and some very interesting papers have been read in the present year. The presidential address was a remarkable one and Dr. D. N. Roy dealt with the subject in a masterly way. Some very able papers have been read by Drs. S. Goswami, P.C. Majumdar, Dakhina Ranjan Datta, Nabadip Chandra Dass, J. N. Majumdar, and Barid Baran Mukherjee to whom our cordial thanks are due. It is a regrettable circumstance that some of the older members of the profession do not take the interest in the welfare of the Society they should. Another remarkable

factor that has been brought to our notice by its worthy Under Secretary Dr. R. M. Banerji, is that some of the members show a reluctance in paying the subscription small as it is. We noticed at the inaugural meeting that some of the members remarked that the subscription was really too small, but, we are told that they are the very members who are reluctant to pay now, while the other members pay most gladly and very regularly. All necessary information may be obtained by writing to the secretary of the society, Dr. J. N. Majumdar, at 203-1 Cornwallis Street, Calcutta.

GLEANINGS.

THE LAW OF SIMILIA.—*Ipecacuanha*—*Ipecac*—is one of the leading homœopathic remedies for asthma. Sharp, in his famous Tracts, relates numerous cases of the effects of this drug on individuals. Here is one of them :

“Two similar cases, the wives of medical men, are given in Vol. 24, page 233, by Dr. Scott. One attack, caused by being near her husband at the time he put some *Ipecacuanha* into a bottle, was so violent as nearly to prove fatal. There was a remarkable stricture about the throat and chest, with very troublesome shortness of breathing, with a particular kind of wheezing noise. The symptoms were aggravated at night. At 3 o’ clock in the morning she was gasping for breath at a window, pale as death, her pulse scarcely to be felt, and the utmost immediate danger of suffocation. She became easier about 11 A. M. till about 11 P. M. The same scene was continued eight days and nights successively”

In some of the cases related the person affected could feel the influence of the drug when it was being handled, even though the person were in the furthest room in the house. This demonstrated that *Ipecac* in very infinitesimal

quantities—if it can be termed quantity—will produce all the symptoms of asthma. That it will cure many cases is well known. Hence, here is a very substantial proof of the principle on which Homœopathy is founded.

STIMULATING THINGS.—The Medical Summary for April, editorially, says :

"The misuse and abuse of the mild chloride of mercury a few decades ago, caused this old-time remedy to somewhat fall from grace. In the presence of the chlorides, particularly the chloride of sodium, calomel may become converted into the bichloride of mercury, but this condition does not take place in the alimentary canal to such an extent as to produce much harm. It is almost an axiom that calomel stimulates every gland and tissue that secretes a fluid."

There are two points in this, first, that calomel cannot do "much harm," and second, that it "stimulates every gland." If a patient wants "remedies" that will not do "much harm" he knows where to go for them. As for the second it can be said that if stimulating every gland is a good thing, then calomel is a good thing. A big drink of whiskey stimulates the whole man and, on the same line of reasoning, it, too, must be a good thing, as must be every other stimulant on the same line of reasoning.

"WHITE MAN'S FOOTSTEPS."

The North American Indian dubbed the plant known as Plantago, "white man's footsteps" because, according to the Indians, and they are keen observers of nature, the plant followed the white man and was never seen where his footsteps had not penetrated. Certain is it that the plantago came with the white race to North America. Its clinical use among physicians has been very limited, but it has always

been a "people's remedy." Many of the old and popular salves and ointments for skin diseases and injuries of various kinds are nothing but *Plantago* ointment or cerates.

One would think that a remedy with this history would be peculiarly adapted to the ills of the white race, and perhaps it is, though definite uses outside of toothache, and earache, are not given in the textbooks, although the remedy was well proved.

Looking over the provings (Allen's handbook of *Materia Medica*) there seems to be one condition that stands out prominently, though it is not a disease *per se*. Many persons, during the day and especially after going to bed, are troubled more or less by sudden and fleeting pain. The provings tell of "sudden," "boring," "rheumatic," "sharp" and "darting" pains that come and go, now in the head, now in the great toe, or in almost any part of the body, generally in one part but sometimes running along the arm, leg or other parts, from one point to another. The pains do not last long in one spot. Here are the words describing the pains in the head : "Intermittent, in evening ; in twinges in different parts, now in right temple, extending backward, then through the occiput from ear to ear, then in other parts of the head." In the chest we find "catching pain," "pleuritic pain," "darting pain." So it goes throughout the various parts of the body, a veritable Puck of pains coming and going, darting and shifting. Such pains may accompany almost any disease and always the total symptoms must guide to the remedy, but where such pains exist with no special illness *Plantago* ought to be the remedy. It has some reputation in neuralgic pains that shoot about. It is not poisonous and may be used in tincture or in potency, the latter preferable, say, the 3d.

HINTS.

If you are troubled by insomnia try a dose of *Coffea cruda* 6, and also bathe the feet in hot water just before going to bed.

Any one troubled with an eye affection, sores on the face or hand or catarrh, should use individual towels for the protection of other members of the family.

Do not be afraid to use soap on the face, but be sure to get a good soap.

When other means fail try a big pinch of snuff in hiccough, the following sneezes are said to blow it away.

One part of the tincture of *Echinacea* to three parts water is a fine lotion for bruises that threaten to suppurate or are suppurating. Also take some of the remedy internally.

Dr. A. H. Kempton, Newport, N. H., had a bad case of "drooling" in an eight-year-old child. *Mercurious* 6 cured it.

Drowsy and stupid during the day but sleepless at night, or, if one does doze, is assailed by horrid dreams, is a condition that may find relief in *Argentum met.* 30.

Cina 3. given three or four times a day and continuously, is an excellent remedy for worms of any sort.

Stupor, sluggishness, slow breathing, general appearance of heaviness, red or dark red face, are a group of objective symptoms that indicate *Opium* 3. Also, unnaturally heavy sleep, calls for the same remedy.

The cold where the eyes are red, smarting and watery needs *Allium cepa* 3.

Vertigo, with weakness, nervousness, restless *Ambra grisea* 3. Also a remedy for vertigo, especially marked in the open air.

Ambra grisea is commended for "nervous deafness." whatever that may be. Here it is best in the 30th potency.

Those who awake in the early morning hours with

colicky pains, rumbling and thin diarrhoea, will find a cure in *Aranea diadema* 6.

Quillaya saponaria has been highly commended for the acute stages of grippe or a bad cold and sore throat; it is most effective at the beginning to check the disease, but is not so useful after the attack has lasted for some days. The strength recommended is medicated pellets of the IX potency, or the tincture.

Where the baby, child or adult is subject to convulsions, spasms or fits, turning the patient on the left side is said to be the best and quickest means of arresting them. This proceeding does not remove the cause, but it gives timely relief.

Natrum mur. 30 will often cure the long lingering effects of malaria, or long standing cases.

China 6x taken twice a day for ten days and then at increasingly longer intervals will, according to Dr. Thayer, permanently cure gall stones i. e. not an attack, but the tendency to them.

Apis mel. 3 is probably the best remedy for hives.

Clinical Notes.

Rumex received a case of long standing cough in a patient who had diarrhoea and aggravation of the cough at night.

Nux moschata relieved the dryness of the mouth and tympanitis in a case of typhoid in a girl of 8 years old.

Silicea 30 by continued use cured a case of necrosis of the humerus in a old gentleman of 60 years.

Calc. Fluorica 6x cured a fatty tumour on the hand, one dose a day for nearly a month with occasional stoppage.

Calc. Sulph. relieved the suffering and helped the healing.

process considerably in a case of necrosis of the metatarsal bones where the patient had been operated upon three times.

Lachesis relieved the obstinate constipation of an elderly lady at the climaxis, where the strongest purgatives had no effect.

Bryonia 30 cured a case of remittant fever with bronchial complication where the temperature went up steadily from sun rise to sunset.

Apis 6 checked the fever paroxysms in a so-called case of malaria where the paroxysms came on at 3 p. m.

Ars. Iod. 30 relieved the cough and checked the fever completely in a case of consumption.

Calendula 3x internally and Calendulated oil externally cured a case of gangrene of the finger in a patient who had been operated upon three times previous to the homeopathic treatment.

Lachesis 30 relieved a case of cauliflour growth on the thigh, where it was diagnosed as cancer and an immediate operation was recommended, in an elderly lady of otherwise good health.

Bryonia 30 relieved the asthmatic fits promptly in a young boy who had been suffering for a long time and could hardly move with it.

Verat. Alb. 30 repeated doses checked the diarrhoea and relieved the hemorrhage in a case of uterine tumour.

Clinical Cases.

By C. E. WHEELER, M. D.

Before I set before you any new cases I wish to give a further report upon two of those cases which I had the honour to submit to you some months ago. The first was a case of rectal carcinoma in a woman of fifty-seven, seen

first in January, 1907. I may remind you that then she had a large mass obstructing the bowel completely, or almost completely, with consequent loading of sigmoid and colon, and secondary masses of growth in the abdomen. Under treatment with unit doses of *Ornithogalum* and *Hydrastis* and *Podophyllum* as intercurrent remedies, she improved steadily for six months, gaining a stone in weight. Partial obstruction continued, and, except on one or two occasions, the motions were always loose, bleeding and discharge became less and less frequent, and pain greatly diminished. From June to the end of August the case remained stationary. In August, pain, chiefly in the sacrum and surrounding regions, began to be severe, and weakness increased so that she was able to come to the hospital more and more seldom, and the later reports were conveyed to me by her daughter. There has been some loss of weight and some bleeding during the last few months, but the motions tend to be more formed, and it is the pain and weakness that distress her. The pain was at first controlled by *Scirrhinum*, later when that failed *Dulcamara* 30 did some service; finally recourse had to be had to *Opium*, at first in small doses, finally in the form grain of acetate of morphia. The dose, repeated as necessary, but required at least once a day, has been maintained since November, and I wish to record my belief that it has had distinctly a beneficial influence on the growth and the cachexia. The patient to-day is better than in last December, when I thought the end very near. Besides the morphia she has taken *Terebinth.* 3x, and latterly *Arsenic* 3x. I make this report to keep you acquainted with further progress of a very interesting case. When I saw her first I thought she had at most three months to live. She is still alive fifteen months later, and, apparently, after a relapse, again slightly improving.

—*The Homeopathic World.*

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সাধারণের হৃদয়হার জন্ত আমরা বিলাত ও আমেরিকার এসিদ্ধ হোমিওপ্যাথিক ঔষধাদি ও নানাবিধ চিকিৎসোগোষাগী জব্য আনয়ন করাইয়া সর্বদা উচিত মূল্যে বিক্রয় করিমা থাকি। এসিদ্ধ ডাক্তার শ্রীযুক্ত জে, কে, মৈত্রের নিজ তত্বাবধানে আমাদের ঔষধালয় পরিচালিত হইয়া থাকে।

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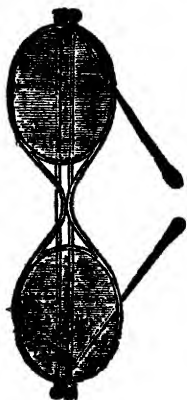
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হোমিওপ্যাথিক ঔষধ টিউব শিশিতে ড্রাম ১/৫, ১/১০ পয়সা।

আমরা আমেরিকার বিখ্যাত “বোরিক এণ্ড টেকেল” কোম্পানীর ও জার্মানীর নিখাত ডাক্তার “উইলমার শোলসবের” ঔষধালয় হইতে বিশুদ্ধ ঔষধ প্রচুর পরিমাণে আমদানী করিয়া অল্প লাভে সস্তা দরে বিক্রয় করিতেছি। আমাদের ঔষধালয় একজন সুযোগ্য ডাক্তারের তত্ত্বাবধানে ও শিক্ষিত কম্পাউণ্ডার দ্বারা পরিচালিত। আমাদের ঔষধালয়ে যে বিশুদ্ধ ঔষধ বিক্রয় হয়, ইহাতে আর সন্দেহ নাই। ইংরাজী পুস্তক, শিশি, কর্ক, সুগার, মোর্বিউল ইত্যাদি প্রচুর পরিমাণে বিক্রয়ার্থ প্রস্তুত আছে এবং বাজার অপেক্ষা সস্তা দরে পাইকারী ও খুচরা বিক্রয় হয়।

কলেরাচিকিৎসার বাক্স—পুস্তক, ক্যান্ডার, ড্রাগার সহ ১২ শিশি ঔষধপূর্ণ বাক্স ২ টাকা, ২৪ শিশি ৩ টাকা, ৩০ শিশি ৩৭/০ আনা, ৪৮ শিশি ৫০ টাকা। মাণ্ডুল স্বতন্ত্র।

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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XVII.]

JUNE 15, 1908.

[No. 6.

PROPAGATION OF HOMEOPATHY.

Homeopathic healing art has done much in our land but what we want most now is the spreading of it in various parts of the country. There is a strong hold of homeopathy in Calcutta and its immediate neighbourhood. There are tolerably a good number of educated and experienced physicians of this system here but in distant parts of the country no name of homeopathy is even heard. As we are the custodians of Hahnemann's immortal system of medicine in India, it behoves us to endeavour to find out the means of propagation of homeopathy in this country.

We require two things for this purpose. First the proper teaching of homeopathy and second sending out educated and properly qualified physicians to all cities and towns of this vast land.

The teaching of homeopathy has been carried on in an imperfect manner from a long time in this city. It was long ago that the Calcutta School of Homeopathy was started and it was doing some work. In a few days a division took

place and another school was brought into existence. None of them is well equipped. Subsequently another school was started and in this way multiplication has been going on without proper efficiency in the management. Among some of those institutions, teaching is carried on properly and strict examinations are held but we are sorry to have to remark that undesirable means are often resorted to in others. We beseech the proprietors of all these institutions to combine and form one well equipped and fairly managed homeopathic college.

We have just got a letter from Dr. H. C. Allen in which he says, when convenient, send me the catalogue of your homeopathic colleges in Calcutta. At a recent meeting of the American Institute, and while discussing questions of study in the intercollegiate committee, the standing of your Homeopathic College was involved. Some of our homeopathic colleges cannot accept their graduates on account of short time and deficiency in many of the fundamental branches, especially laboratory works, bacteriology, chemistry, pathology and anatomy. It would be a grand thing for Homeopathy if the various faculties of your homeopathic Colleges would combine and start one strong College where, with the assistance of your Hering graduates, Hahnemannian Homeopathy might be taught."

Dr. Allen is a great friend of Homeopathy in India. Many of our young men resorted to his College and returned with true knowledge of Homeopathy and the collateral sciences. We hope our colleagues would act up to his advice so that our graduates will be received in the United States homeopathic colleges with open arms-

Our second proposition, for the propagation of Homeopathy in this Country, is to send out experienced and well read homeopathic physicians to different cities of this Country. We have a good big number of physicians of our rank in this

city of palaces but many towns and villages are not in possession of duly qualified physicians. At one time we had a few lay homeopathic practitioners in North West India but their influence was great. So we had in Benares Dr. Lokenath Maitra and a few of his coadjutors, and they performed wonders. It is for their exertion that Homeopathy was very thoroughly known there. We had in Lukhnow Dr. Atul Krishna Bose and in Agra Dr. Gobind chandra Roy ; though they had no medical degree from any College but they had heart for our cause and so homeopathy was better known than at present. We frequently meet with calls for supplying good homeopathic physicians in towns & villages outside of Calcutta. Some people who are staunch homeopaths here but when they go home in different parts of the Country, they cannot get homeopathic helps," and so fall victim in the hands of allopaths. A few days ago a homeopathic physician of this city went to treat a case of carbuncle in a Rajah's place in Orissa. The case was cured and the Raja was so charmed with the homeopathic treatment, that he wanted to establish a Charitable Dispensary in his city. We had the pleasure of sending two homeopaths from our school and the institution was established.

The other day a requisition was made by a friend of ours who is the manager of a Rajali in Rajshahi to send them a homeopathic physician. We sent one and he was permanently retained in their service.

Big cities and towns in India require more experienced and thoroughly qualified physicians of our rank. In Bombay Mr. Malabari, the distinguished social reformer requested me to send a homeopath there whom he promised to help with a house free of cost and try to introduce him to good practise.

Now the time is come and it is with us to exert our utmost for the propagation of the new science and art of healing throughout the length and breadth of this vast Country.

ASCLEPIAS TUBEROSA.

BY C. M. BOGGER, M. D.

Pleurisy root is a general relaxant, increasing the secretions. This is particularly true of the skin, mucous membranes and pleura. There are also certain myalgic manifestations. Often a gentle perspiration only appears, then again the sudoriferous glands may be very active and pour out a profuse sweat; in either case the moisture seems very natural.

The intestinal secretions are also augmented, ending in a very characteristic diarrhœa. The provings show several kinds of stools, but the one most commonly met with in practice has an odor of rotten eggs (*Chamomilla*) and burns the anus like fire (*Iris versicolor*, *Lycopodium*) as it passes. It is generally of a dark color. I recently cured a diarrhœa of this kind in an aged man who had just passed through a long siege of pneumonia under allopathic care. It was interesting to note that as the diarrhœa improved he showed symptoms indicative of incipient pleuro-pneumonia, but it all passed away without any special event. You should know that when old symptoms reappear they had best be left alone as they will eventually pass away of their own accord and leave the patient in much better health. If you are imprudent enough to give a new remedy while the symptoms are leaving in the reverse order of their appearance, you will generally spoil the whole case and get the

patient as well as yourself into a lot of trouble. It also has stools like moss floating in water (*Magnesia carbonica*, *Gratiola*). It also has oily stools, leading one to think that it must have some effect upon the pancreas. Other remedies with this symptoms are, *Causticum*, *Picric acid*, *Phosphorus*, *Thuja* etc.

The main interest in *Asclepias*, however, centres about the chest. Very many cases of pleurisy and pleuro-pneumonia and some of the pleurodynia have been cured by it. In such instances the temperature is usually not very high, and the pulse is soft and compressible. There are various sorts of chest pains, none of which are especially noteworthy unless it be one of a cutting nature. It is usually sensitive externally, and the patient has a desire to sit up and lean forward. The cough is usually partly moist, and may not be painful. Like under *Bryonia* the cough often causes pain in forehead and abdomen, but the posture assumed is just the opposite. It is one of the drugs having diagonal pains.

It must always be remembered that the homeopathic prescription is based upon the combination of the symptoms and of their groups. When the groups containing the principal actions of the remedy are combined we may reasonably expect a good result, if the conditions agree, even if the symptoms given have not as yet been elicited in the provings of that particular remedy. In the case of *Asclepias* we have sweatiness combined with pleural and enteric symptoms, the former ameliorated by bending forward and the latter marked by burning discharges; when this combination is present your remedy is certain.

Compare : *Bryonia*, *Ferrum phosphoricum*.

LAC CANINUM.

Some of the earlier writers in medicine mention the use of bitch's milk as a remedy, but we owe its modern use in medicine to Homœopathy, where it fills a very useful and pretty well defined place. It is not a little remarkable that the weak points in the organism of the dog should correspond to the region most affected in the human economy by provings of this substance.

The tendency of Lac caninum symptoms is erratic, to wander from place to place, but in doing this they almost invariably change from side to side, be the disease what it may. This is especially true of the throat manifestations. Objectively the parts may present almost any appearance from a simple angina to tonsillitis or diphtheria. As a matter of fact, this repeated changing from side to side happens in recurrent tonsillitis oftener than in any other throat affection. For this type of sore throat it is the only remedy I know of.

In diphtheria the membrane is very often of a glistening chinalike whiteness, and the mucous membrane of the throat also takes on this glistening or varnished appearance. (Apis, Kali bichromicum.) Cracks often appear in the angles of the mouth and nose.

This alternation of sides is not restricted to the throat by any means, it is not unusual in the female sexual organs; first in one ovary then in the other, or they shoot from one to the other. Here Cimicifuga laeds all other medicines, but if the concomitants agree Lac caninum may be indicated.

Before we leave the female sexual sphere I wish to call your attention to the great usefulness of this medicine in drying up the breast milk. Sometimes, for various reasons, you may find yourself compelled to stop the flow of milk, and it will be one of the pleasures of your practice to do

this without resorting to the nasty practice of applying camphorated lard or Belladonna ointment, like the old school. If *Lac caninum*, in the rapidity of its action should form a few nodules in the breasts, *Phytolacca* will speedily disperse them.

The *Lac caninum* patient is exquisitely sensitive, overwrought and full of all kinds of horrid imaginations ; she thinks she is tormented by the presence of snakes, dreams of them, is terrified by them. She fancies her body is loathsome with disease or that she has some poison or other in her system (*Lachesis*, *Vipera*). She even don't want her fingers to touch each other, so she keeps them spread apart (*Lyc.*, *Sec. c.*). This sensitiveness extends to the retina, which retains impressions of objects long after the eyes have been turned elsewhere, like *Nicolin* and *Tuberc.* *Lac caninum* then presents the very useful combination of throat and sexual symptoms ; one that will come up in your work pretty often, and when it does you will do well to look this remedy over very carefully. Sore throat coming on and passing away with the menses should attract your attention. (*Mag. c.*) Menses are sometimes green.

The symptoms are every apt to be worse on the morning of one day and on the afternoon of the next. In a general way it reminds one very much of *Lachesis*.

CERTAIN CHRONIC CATARRH.

BY DR. L. STERNBERG, BERLIN.

In our practice we find now and then complications of a simple cold, which prove very painful and dangerous, and at times even require surgical operations. These arise from the passing of the nasal catarrh to the cavities which are in direct communication with the nostrils. These cavities, enclos-

ed by the bones of the cranium, are the maxillary cavities, called also the antrum of Highmore, the frontal air sinus and in a certain sense also the two tympanic cavities. Although these latter can hardly be said to be auxiliary cavities of the nose, they may still be included within the scope of our presentation, owing to the danger to which they are exposed from diseases of the nose.

Their connection with the main cavity, as we may denominate the nasal cavity, is direct, and these cavities are also covered with a tender mucous membrane, so that catarrhs of the nasal mucous membrane, whether arising from cold or through the effect of infectious matter (diphtheria), may freely be communicated to it. Nevertheless their communication with the main cavity and through it with the outer world is too limited to be sufficient to discharge any great amount of pus that may gather. Thence comes the great danger from the formation of pus in these firmly closed cavities, especially in the cranial bones, where this is yet increased by the proximity of noble organs; the antrum of Highmore being close to the eye, the frontal sinus and the tympanic cavity close to the brain. For if the pus has not a free egress, it makes its own path. We must not overlook the fact that, although the bones themselves form a pretty firm protecting wall, there are breaches through them in the form of the very fine passages which serve for the entrance of the blood vessels which enter into the bones to afford them sustenance; these points also are the source of danger in infected wounds of the head, which are apt to cause diseases of the brain, even where the cranial walls themselves have not suffered lesion.

From this it would follow that even in slight cases of catarrh we ought to have in mind the secondary affection of these auxiliary cavities, and that we should be careful to

ward off any transition into a puriform variety, which might necessitate a surgical operation.

It may, therefore, be useful to enumerate here the chief symptoms which would indicate the affection of the above mentioned auxiliary cavities. I will not here enter on the participation of the middle ear in such catarrh, since, with respect to them, I may refer to a previous article on this subject in this journal. Diseases of the maxillary cavity are usually indicated by the painfulness of the cheek and of the whole half of the face affected ; this is always especially increased by touching the region of the roots of the upper molars ; if this disease progresses, it will be indicated by the swelling of the skin or of the half of the face, and by fever and shaking chills.

When the frontal air sinus is affected we find an extremely violent frontal headache, especially at the root of the nose later on in the protuberances of the forehead, also a swelling of the skin on the forehead and the region of the root of the nose ; so also fever, shaking chills and when there is a danger of effusion on the brain, we shall find symptoms showing the affection of this centre, vertigo, nausea, convulsions, etc.

But it should not be allowed to come so far, and this article is written to advise the consultation of a physician as soon as the auxiliary cavities become painful in the course of a catarrh or any other disease of the nasal cavity. Only a physician will be able by means of a thorough examination and by the consideration of the totality of the symptoms to give the correct diagnosis, and by taking the trouble at the right time, to check as far as possible the progress of this process.

I was induced to write this article by the favorable and rapid cure of three cases, especially also by the belief that

I owe my success to a homeopathic remedy, which seems to be almost a specific in these cases of disease. In all these three cases, as I would at once promise, the trouble was not catarrhs of a puriform nature, but proximately simple inflammatory catarrh, with rather sparing secretion.

I. The first case was especially interesting, because the severe cold of the patient had been followed by the inflammation of the conjunctiva on both the eyes, for which she was treated for months by a specialist without the least success, so that he expressed the supposition that the trouble was of a rheumatic or neurotic nature. The painfulness of both the maxillary cavities, the close connection and sequence to a cold, the otherwise sound constitution of the woman, and especially the success of the remedy, which in four weeks cured a disease which in spite of continuous treatment had already lasted for a year—all led me to the conviction that the inflammation of the conjunctiva was the result of the catarrhal disease of the cavities of Highmore.

II. The second case offered nothing peculiar, as the symptoms here plainly indicated "catarrh of the maxillary cavities." It was a fresh case, which was checked in a few days, although it had already caused the swelling of the corresponding side of the face.

III. The third patient had already passed through three operations with yearly intervals on account of abscesses of the frontal sinus. With him I was able at his fourth attack to make a surgical operation unnecessary.

In all these cases it was Kali Bichromicum, to which I ascribe my success, for I made no other prescription. I had frequently before had the opportunity of observing the curative effects of this remedy in old cases of catarrh of the fauces and of the nose, and I believe I can recommend it as a specific in the cases of disease of the auxiliary cavities of

the nose, where there is only a slight secretion of mucous or puriform matter; it is equally effective in recent as in chronic cases, if their progress is from the beginning more of slow and insidious nature; in violent cases Belladonna is indicated.

Of course, with the sharply defined symptoms of our homœopathic remedies a specific is not to be taken in the same sense in which allopaths speak of a specific, as, e. g., Salicylic acid in rheumatism; for in the disease in question there is quite a lengthy series of symptoms which have to be considered in order that we may select the right remedy. It is even quite possible that Kali bich. may be contraindicated in some case. I would merely say so much, that in cases where we find the above mentioned symptoms this remedy deserved notice, especially in the commencement of the disease. When, however, there have been formed larger accumulations of pus in the cavities, I would not any more rely on this remedy but rather turn to Mercurius or Silicea, in cases a surgical operation should not as yet be called for to discharge the pus formed. After an operation Kali bichromicum as well as Mercurius or Silicea will be found of use in securing a full cure,—Leipziger populaere Zeit. fuer Hom.

BLINDNESS FROM DRUGGING.

BY DR. G. F. THORNHILL, PARIS, TEXAS.

Three weeks ago a lady came to my office totally blind in her left eye. Eight months ago she was confined and given Ergot to stop hæmorrhage. Three months later she noticed her sight was impaired and went to a specialist. He put "something" in her eye. That night she lost the sight completely. He treated her several months, finally examined her with the X-ray and told her that he "could see the

optic nerve was dead"—and I suppose could see just as easily what she was thinking about—that there was no hope for her.

I examined her case closely, and I knew from her symptoms Atropine or Belladonna was the "something" put in her eye. Besides this as a key-note she had other strong Belladonna symptoms. Two doses of belladonna c. m. has completely restored her sight in three weeks. She can read finest print with that eye, but of course is a little weak yet. Improvement began in twenty-four hours.

I find the most of my chronic work is undoing allopathic dosing.—Medical Advance.

A CALCAREA SULPHURICA CASE.*

BY KATHERINE KLEIN, M. D., JERSEY CITY.

Mr. M. age 54. Up to December, 1904, has always enjoyed good health, though suffering from chilblains. In December he bruised the ball of the great toe. After consulting chiropodist and physicians, who advised various salves and antiseptic dressings without avail, gangrene, set in and he entered the hospital in January, 1905.

The big toe and the first joint of the next was amputated with no relief, the wound remaining tender and swollen, with profuse suppuration. Numerous sinuses formed with well-marked demarkation.

After two months of ineffectual local treatment, he was advised to have complete amputation of the foot and ankle which he refused. He was then dismissed from the hospital. I was then called in to see what Homeopathy could do, in March, 1905.

After careful examination with consultation, wherein no subjective symptoms showed, we decided to prescribe C lo

sul. from clinical experience of the local symptoms, as follows: Foot swollen, purple, somewhat tender. Swelling extending to ankle. Sinuses discharging pus between all the toes, and well as the stumps; discharge being thick, green, foul, sloughing off in lumps.

Calc. sul. 200 B. & T.—One dose given and the wound cleaned with sterile water, then Calendula.

An apparent aggravation immediately followed, caused by the free discharge of pus. Then pain and swelling lessened, the patient resting better and gradually able to move about. This improvement lasted two weeks, then stopped.

Calcarea sul. 200. repeated—the result of which was a great surprise. The following morning, on dressing the wound, a mass of maggots popped out. From then on, the patient continued to improve, there was no more loss of tissue, healthy granulation forming in the wounds in true order of healing, the last affected being first to heal, as Hahnemann so well proves in the Organon. The amputated stumps were stubborn, but finally in three months the patient was entirely well, able to wear his shoe and walk out in all weather, without any after effect of pain or chilblain.

—*North American Journal of Homeopathy.*

EFFECTS OF DISEASE PROPAGATION AND DISEASE SUPPRESSION.

Mrs. F. H. Biskup, West St. Paul, relates (January 25, 1907.) . . .

Her daughter, Frances, was vaccinated, aged six, to enter school—is now twelve. Vaccinated in the fall. If worked moderately. About Thanksgiving the back of her neck and head and her back between the shoulders became inflamed

and lacerated, discharging quantities of matter. Dr. S — (a prominent regular) dried it up, and then, shortly after, her nasal passages became diseased in the same way, and, Dr. S — said it was "diphtheria of the nose. The health-office so pronounced it and the family was quarantined.

Ever since, until recently, the child has had severe discharge from nose and has never been as healthy until quite lately. Now she seems to have recovered her former health.

Note the malpractice of "drying up" the ulcers, and the severer form of disease that followed. This is always the way when the treatment does not go to the cause and root of the trouble : nature is baffled but not defeated, and tries again, but not under as favorable conditions as the first time.—The Liberator.

RHEUMATISM. *

Rheumatism (L. Rheumatismus) - to have or suffer from flux i. e. to be affected with looseness.

Definition of Rheumatism :- A specific febrile excitement probably due to a morbid state of the system by constitutional development, and expressed by inflammation of a peculiar kind in the parts about the joints especially in the white fibrous tissues, such as the sheaths of the muscles and muscular fibres, tendons, aponeurosis, bursae, capsular ligaments, periosteum and pericardium. The various local phenomena of the disease have a tendency to shift from part to part, the most remote from each other ; and the febrile state is accompanied by profuse acid excretions from the skin, by the separation, in some cases, of large quantities of uric and sulphuric acid through the kidneys, and by a highly fibrinous condition of the blood.

* A paper read before the Calcutta Homeopathic Society.

Pathology :- Various opinions have been entertained from time to time regarding the nature of the disease. But the most recent enquirers into the nature of rheumatism (Basham, Garrod, Fuller) show that it acknowledges no general external source, and it is not even yet demonstrated that any definite offending matter or poison pervades the system. It is presumed, however, by inductive reasoning, that some morbid material is generated by and within the bodies of those in whom rheumatism is fully developed, and that it is not absorbed from without.

Dr. Prout first suggested that the presence of superabundance of lactic acid in the system was the cause of rheumatic fever. A suggestion adopted by Dr. Furnivall, Todd. Headland, Fuller, and Mr. Spencer Wells. Before the starch of the food can be applied to the maintenance of the animal heat, it has to be converted into lactic acid, which then combines with oxygen, to form carbonic acid and water ; and whatever tends to interfere with this normal series of changes from taking place, may lead to the accumulation of lactic acids, or other allied acids in the system.

Dr. Fuller believes the poison of rheumatism to be identical with some natural excretion of the skin, and he grounds his belief chiefly on the following circumstances :- (1) that when the skin's action is interfered with, especially in old people, pains or stiffness, of a rheumatic character are generally the consequences ; (2) that the perfect development of the means which nature adopts to relieve these symptoms, suggests a relationship between rheumatism and cutaneous excretion. "No sooner is a person attacked by the disease" writes Dr. Fuller, "than excessive perspiration is set up, as if with the view of getting rid of some peccant matter, and the secretion is most profuse at the very part where

local inflammation is taking place." Both Dr. Craigie and Dr. Watson hold that rheumatism implies, inflammation of a peculiar and specific kind ; and the latter goes a step farther, and writes that "Rheumatism is a blood disease ; that the circulating fluid carries with it a poisonous material which, by virtue of some mutual or elective affinity, falls upon the fibrous tissues in particular, visiting and quitting them with variableness that resembles caprice, but is ruled, on definite laws to us as yet unknown.

Dr. W. B. Richardson (following the example of Mr. John Simon and Dr. Brinton) has made an interesting series of experiments ; from which he infers that "lactic acid has the power, when existing in an animal body in excess, of producing a class of symptoms attaching themselves mainly to the fibro-serous textures, and which, regarded in all points of view, are essentially the symptoms of acute rheumatic inflammation. In rheumatic endocarditis, the left side of the heart only is affected as a general rule. Hence Dr. Richardson infers that the chemical change whereby the morbid matter of acute rheumatism is produced, is completed in the pulmonic circuit ; that in the respiratory act the acid quality of the poison is produced ; that thus formed, the poison is carried by the arterial circulation to be disposed of by decomposition, or elimination or both ; and that it does not return as an acid by the veins, but simply as a product which admits of re-transformation in the pulmonic circuit into the acid state. For the farther information an investigation about the pathology of Rheumatism my learned colleagues may refer Dr. Aitkins', "the science and practice of medicine." Vol. II. p. 8 ; Dr. Tanners's practice of medicines vol. I. P. 203. Dr. Kellogg's Hygiene and medicines." p. 1171. nevertheless, although rheumatism is undoubtedly stamped with a pe-

cular and specific character, yet the material morbid matter is as yet undiscovered. The exact conditions of the system under which the disease becomes developed are hitherto undetermined like malarious. Whatever the poison may be, it was so far settled by learned investigations that it does not seem to be absorbed from without. It is inbred, and not derived from extrinsic sources. Regarding the origin of the lactic acid, Dr. Headland suggests that ordinarily the starch of the food is first converted into this agent, which then combines with oxygen to form carbonic acid and water, in which state it is excreted by the lungs; but that under conditions unfavourable to this oxidation, the lactic acid accumulates in the system.

There are two very distinct forms of rheumatism, the acute and chronic. Acute Rheumatism, or rheumatic fever, is a disease characterised by fever, profuse acid sweats, and inflammation of the fibrous tissues surrounding one or several of the large joints. It is especially formidable from the suffering it causes, from the intensity of the fever, and from the damage which is so frequently produced by it to the heart. When the febrile action is very slight, and the inflammation of a moderate or mild character, the disease is generally spoken of as sub-acute rheumatism. But if continues a larger time, the patient, being a subject to frequent relapses.

Causes :—The causes of rheumatism are not thoroughly understood. The predisposing cause is constitutional cachexia, which produces a morbid product in the blood, by some unhealthy assimilation. "The circulating blood carries with it a poisonous material, which by virtue of some mutual or elective affinity falls upon the fibrous tissues in particular, visiting them and quitting them with a variableness that resembles caprice, but is ruled, no doubt, by definite laws, to

us, as yet known." These materies morbiæ, with which the blood is loaded, constitute that predisposing cause without which it is probable, the disease would never occur. Hereditary predisposition undoubtedly exists in many persons. The suppression of an eruption or rash, as measles, or the sudden stoppage of dysentery, may also act as a predisposing cause.

The exciting causes are :—Exposure to cold and wet, especially evaporation from wet or damp clothes, causing chill. This is no doubt an explanation why the disease is most common among the poorer classes of society, who cannot protect themselves so effectually as their wealthier brethren. The cold probably excites an attack of acute rheumatism by arresting the secretory functions of the skin, by means of which, in health, morbid substances in the blood are often removed ; now, however, the functions of the skin being deranged unhealthy principles accumulate in the blood, and rheumatism results. Mere cold, however, is not so much a cause of rheumatism as extreme atmospheric vicissitudes. Hence it is found that it does not prevail most, abstractedly, in the coldest regions of the globe but rather in those climates, and during those seasons, which are damp and changeable.

Symptoms :—The earliest symptoms of acute rheumatism are mostly restlessness and fever ; succeeded at the end of some twenty-four or thirty-six hours by stiffness with aching pain in the limbs and joints. These indications of coming mischief usually follow exposure to cold, and damp, and similar depressing influences. The pain quickly increases, and in a very short time is accompanied by swelling and great tenderness of one or more of the large joints, together with high fever and much constitutional disturbance. When the disease is established, the patient presents a pitiable

spectacle, of helpless suffering. He is very restless, yet dare not, or even cannot move; the pain in the affected joints is so agonizing, that the weight of the bed-clothes can barely be borne. The face is flushed, hot and moist. The skin is generally bathed in sweat; which has a very disagreeable acid or some odour; and which reddens litmus paper. The temperature in the axilla varies at different times in the day, perhaps from 100 degrees Fahr. to 102 or 103 degrees, where it rises as high as 105 degrees, the danger is decidedly very great; while in cases about to end fatally it has reached even to 109 degrees and even 110 degrees. The pulse is frequent and large, hard and quick; but it continues regular in uncomplicated cases. The thirst is extreme, and insatiable. There is usually constipation, but occasionally the bowels are much relaxed. The tongue is moist but white and thickly furred; while the saliva is acid. The urine is high coloured, scanty, of high specific gravity, very acid, with perhaps scarcely a trace of chlorine, and loaded with uric acid, or more frequently with urates. It has lately been shewn that the deposits formerly regarded as consisting of urate of ammonia have a variable composition; being made up of the urates or lithates of lime, potash and soda. Relapses are very common. A chemical analysis of the blood shows the presence of a super-abundance of fibrin (hyperinosis), with a deficient amount of salts and red corpuscles. A remarkable feature in this disease is the great tendency to metastasis. Thus inflammation may suddenly leave one joint and appear in another; and then in a third, afterwards jumping back again to its original seat. But the most serious change is when it shifts its place, or extends to the membranes of the heart. This is most likely to do in severe cases, when we may suppose the blood to be loaded with materia morbi rheumatic fever may also but more rarely be complicated

ed with bronchitis, pleurisy, pneumonia, or even with inflammation of the membranes; while very rarely the local effects are such as to lead to disorganization of one or more of the affected joints. An attack, now and then, follows scarlet fever.

Whenever rheumatic fever is uncomplicated, its average duration under proper treatment is from twelve or sixteen to twenty-five or thirty days, in those cases which end fatally, death is almost always due to the cardiac inflammation.

Chronic Rheumatism :—Chronic pain, with stiffness, swelling, and possibly distortion of various joints. This is sometimes a sequel of the acute form of rheumatism, at another times it is a separate constitutional affection coming on quite independently of any previous attack. It is generally very obstinate, prone to recur, and is often worse at night. In time the affected limbs lose their power of motion, and lameness results; the knee-joint being often affected, sometimes there is emaciation of the muscles; sometimes permanent contraction of a limb, bony stiffness of the joint. There is but little febrile disorder, no perspiration, and less swelling than in acute rheumatism.

The fibrous textures around the joints, or the fibrous envelopes of the nerves, or the aponeurotic sheaths of the muscles, the fascias and tendons, or the periosteum, are the parts that suffer in chronic rheumatism. Whichever tissue may be affected, there is, at first only slight constitutional disturbance; but the sufferer is constantly annoyed and his existence at length made miserable with wearing pains causing him to be restless at night and destroying all comforts during the day. In some instances, the pains are worse at night, being aggravated by the warmth affords the greatest relief; the former is usually the case when the

blood is circulating a poisonous material through the system, as in venereal rheumatism, or in that due to derangement of the digestive organs and secretions ; the latter, in rheumatism of an erratic kind, dependent on exposure to damp and cold etc.

There is another form of rheumatism, which is called the muscular rheumatism. Here the pain is purely in the muscular structures, increased by motion. The most familiar local varieties of this affection are stiffneck, lumbago, sciatica or synovial rheumatism, pleurodynia, and rheumatic ophthalmia. 1st. the stiffneck., a rheumatic affection of the muscles of the side of the neck, chiefly the sterno-clido mastoideus, which become rigid, hard, and swollen. The best attempt to turn the neck is attended with acute pain, mastoideus, which become rigid, hard, and swollen. The least attempt to turn the neck, is attended with acute pain chiefly the sterno-clido. 2nd. the lumbago, Rheumatism of the sheaths of the fleshy muscles on one or both sides of the loins, extending to the ligaments of the sacrum, the pain being aggravated by movement of the back and by pressure. 3rd. sciatica. Rheumatism of the aponeurotic parts of the gluteal muscles, accompanied by gradually increasing and darting pain, extending from the nates to the knee ; and sometimes to the ankle. 4th. pleurodynia. In which the intercostal muscles, or the fibrous fascia lining the chest, are affected. And lastly, in rheumatic ophthalmia there is acute inflammation of the sclerotic, the pain extending about the orbit and temple.

As regards the treatment of rheumatism, our medicine in Homeopathy are almost the same, whether acute, chronic, or muscular because our treatment is purely symptomatic. We treat the symptoms of the disease itself and not the disease according to its name as by our Allopathic brothers.

I shall mention here a few important medicines according to the disease.—

ACUTE RHEUMATISM.

✓ **Aconite.** Synochal fever, with great agitation of heart. Red swelling of affected part, very sensitive to contact and motion. Stitching pains in chest, hindering respiration. Great fear and anxiety of mind, with nervous excitability. Retention of urine, and stitches in kidneys.

Arnica. Hard, red, shining swelling of the affected parts. Pains as if sprained or bruised, with a feeling of lameness in limb. Sensation as if diseased part were resting upon something hard. Great fear of being struck by persons coming near.

✓ **Arsenicum.** Burning, stinging, tearing pain, with pale swelling. Pain relieved by application of warmth. Profuse sweat, which relieves pain, but leaves patient very weak. Frequent chills, alternating with heat. Constantly moving affected limbs. Extreme thirst, drinking little and often.

✓ **Belladonna.** Red, shining swelling of joints with pressing, cutting, tearing pain, deep in bones. Frequent darting pains from joint along the limb. Pains which come as suddenly and leave as suddenly. Fever, with dry, hot skin, thirst, and throbbing headache. Visible pulsation of carotids. Drowsy, sleepy condition, with starting. Aggravation at 3 P. m., and from least motion or touch.

✓ **Bryonia.** Stiffness, with swelling, and a faintish redness of inflamed part. Stitching tearing pains worse from least motion. The patient wants to remain perfectly still. Dry hot skin, or else perspiration of an acrid character. Bitter taste, dry mouth, and great thirst. Hard, dry stools, as if burnt. Exceedingly irritable metastasis to the heart.

Cactus. The disease is principally confined to the heart and diaphragm. Feeling as if one iron band was around the heart, preventing its normal action. Palpitation of the heart, worse when lying on the left side.

Caulophyllum. Rheumatism of wrists and finger-joints with much swelling. When disease shifts from extremities to back and nape of neck, with rigidity of muscles. Opression of chest, high fever, and nervous excitement.

Cæsticum. Stiffness and swelling of joints, with burning pains. Great weakness and lameness of lower limbs, and trembling of hands. Pains worse towards evening, and from exposure to cold; better from application of heat. Scrofulous persons with yellow complexion.

Chamomilla. Drawing tearing pains with a sensation of numbness or lameness in parts. The pains are continuous, and get worse at night, with much tossing about. Becomes almost furious about pains, can hardly endure them. Great irritability of temper, is very cross and snappish. Hot perspiration especially about head. Readness of one cheek and paleness of other.

Chelidonium. Rheumatic swelling, with a stone-like hardness of the affected parts. Constant pains under the lower, inner angle of the right shoulder-blade. Stools like sheep's dung.

Cimicifuga. Articular rheumatism of lower extremities, with much swelling and heat of parts. Pain worse from motion, extorting screams. Delicate hysterical females who suffer from uterine diseases.

Colechicum. Moderate swelling with pale redness of affected parts. Pains burning, tearing or jerking, frequently shifting about. Chilliness even near hot stoves, intermingled with flashes of heat. Metastasis to heart, with stitches and tearing in chest and region of heart. Strong and fluttering

beating of heart. Profuse sour-smelling sweats. Urine dark and scanty depositing a whitish sediment.

Lachesis. Swelling of index finger and wrist-joint. Stinging, tearing in knees, with a sense of swelling. Left side is generally affected. No relief from profuse sweating. Patient worse after sleeping.

Lycopodium. Drawing and tearing pains, worse at night and during rest. Painful rigidity of muscles and joints, with sensation of numbness in part. The disease is mostly on right side with or without swelling. Chronic forms, especially of old people. Urine dark and turbid or with sediment of red sand. Constant sensation of satiety feels so full can eat nothing. Constipation, much sour belching.

Mercurius. Shooting, tearing or burning pains, worse at night, from warmth of bed or exposure to damp or cold air. Puffy swelling of the affected parts, of a pale or slight pinkish color. Green, shining diarrhoea, with griping and tenesmus. Much perspiration, affording no relief.

Nux—Vomica. Especially in back, loins, chest or joints, with pale tense swelling. Tensive jerking or pulling pains aggravated by contact or motion. Numbness or lameness of affected parts, with stitching in muscles. Aversion to open air, and great sensitiveness to cold. Heat mixed with chilliness especially when moving. Perspiration relieves the pain. Dyspeptic symptoms. Habitual constipation. Persons of intemperate habits. Irritable mood.

Phosphorus. Tearing, drawing and tensive pains setting in when taking cold. Lameness and weakness in lower limbs. Sensation of weakness and emptiness in abdomen. Belching large quantities of wind after eating. Long narrow, hard stools very difficult to expel.

Phytolacca. Pains shoot from one part to another, joints swollen and red. Pains in middle in long bones

or attachments of muscles. Worse in damp weather and at night.

Pulsatilla. Not much swelling or redness of the affected parts. Pains which shift rapidly from one part to another. Sensation of weights in the disordered structure. Chilliness, even in a warm room. Craves cold, fresh air; feels worse in a warm temperature. Persons of a mild, tearful disposition. Bad taste in the mouth in the morning.

Rhustox. Swelling and redness of affected parts. Pains worse during rest and when first commencing to move. Better from continued motion and external warm applications.

Sulphur. Chronic form and for secondary effects of acute rheumatism. Tearing, or dull aching pains. Constant heat in top of the head. Frequent weak, faint spells.

Thuja. Tearing and beating pains, as if from subcutaneous ulceration. Feeling of coldness and numbness in parts. Rheumatism in syphilitic subjects. Symptoms worse in a warm room.

ACCESSORY MEANS:—Patients, who are most afflicted with this complaint, should if possible reside in a warm, dry climate. At any rate, such patients should wear flannel or other warm clothing, and guard against atmospheric changes. The face should be protected from cold and damp. Wet compresses, covered with dry flannel, over the affected joints, are always useful. In these means may be added friction with liniments medicated with Arn. Rhustox, or other remedy indicated.

LASTLY THE DIET:—It should be simple and easy of digestion, as attacks are often occasioned by disorders of the stomach.

PULSATILLA IN MALPOSITION OF THE FOETUS.

The first allusion of which I am informed by a medical author to the power of Pulsatilla to correct mal presentation of the foetus, is the familiar statement of Breserio that Dr. Bethmann, in the Homeopathic Gazette, reports an observation which should encourage us to follow his example. A woman in labor sent for him. The membranes were not yet ruptured and the orifice of the womb but slightly opened, notwithstanding the presence of severe and protracted pains, and by an examination, he recognized a shoulder presentation. "Not willing to precipitate anything" (foetus, I suppose), he gave a dose of Pulsatilla ; some minutes, after, the woman experienced a violent pain, with such a sensation of overturning in the abdomen that she was frightened ; then, after some time of quiet, the pains recommenced regularly, and on the second examination Bethmann was greatly surprised to find the head presenting ; the delivery terminated naturally." "I myself," continues Breserio, "obtained, five years ago, upon a lady in the rue St. Denis, a similar result by the use of the same means under the same circumstances."

I.

In the American Homœopathic Review, May No., 1894, Dr. Mercy B. Jackson, of Boston, reports the case, May, 1862, of Mrs. T., in her eighth pregnancy, who had puerperal convulsions in her last two confinements, and suffered since with severe congestion of the head and neuralgia. The doctor listened to the beating of the foetal heart, and found it not in the right or left iliac region, but beating strongly about two inches above and to the left of the umbilicus : On further examination, she found the back

of the foetus to the mother's back, the small parts in front would scarcely reach the foetus per vagina, but from the little that could be touched, believed it to be one of the nates. Pulsatilla, 30th, five pellets in half a glass of water. Dr. Jackson returned home and made arrangements on account of the tendency to convulsions, should it be necessary to take the child with forceps. Being called five days later, found the patient with severe periodical pains, the os uteri undilated and the foetal heart beating in the same place, gave Pulsatilla as before; pains left and all slept till morning. She could then mark points of the nates and assure herself of the presentation. In the meantime, she had searched for light on means to avert convulsions, and finding the record of Dr. Bethmann's case, hopefully gave Pulsatilla, 30, in solution, a teaspoonful every three hours when awake. On the third day of its regular use, the patient felt a great commotion in the abdomen with pain and necessity to go to stool, and soon felt better and more natural than for a long time previous. At 11. A. m, next day, she was far advanced in labor, the head coming down rapidly, in thirty minutes, a boy, weighing eight pounds, was born. Both mother and child did remarkably well.

II.

Mrs. P., September, 1892, who had four children all born by the breech; was on this occasion, also of breech presentation, treated in the same way, with similar result.

III.

May, 1863. Another case of breech presentation was treated in the same way, with the same result.

IV.

August, 1863. Another breech case, primipara, was treated by Dr. Jackson with Pulsatilla 30 with similar result. The patient had passed expected time ten days, when the

malposition was discovered and Pulsatilla given ; twenty-four hours later, the head was found presenting.

V.

October 20th, 1863. The fifth case in which a breech presentation had been ascertained in the same manner as before, and Pulsatilla administered, had the happiness to attain a few days later the same result. The child was born, after three hours labor, with vertex presentation, second position all the other mentioned cases in the first position. These five were all in which she had, at that time used Pulsatilla, and all successfully.

VI.

August 19th 1866. A case of labor began, yet delayed ; foetus lying across the abdomen, head to the left, back upwards, only the knee within reach, the breech being high up on the right side, head beating on a line with or a little above the umbilicus. Gave Pulsatilla 30, in half a tumbler of water, a teaspoonful at 2-30 P. m., continued every hour. At 6. P. m., the head had come down on the left side, so that it could, with great exertion, be touched ; the knee had receded, and the pelvis on the right side was empty. At 12. P. m., examination showed the head fully down ; at 4. A. m. a girl was born, after only 2½ hours of much pain. When asked if she had suffered much, the mother replied, "No ! but a tremendous commotion." This was the seventh case, six breech and one transverse, in which Pulsatilla 30 had changed the presentation to the vertex before the membranes had been ruptured.

VII.

May, 1870. A woman, eight months pregnant, with breech presentation, took Pulsatilla 30, as always prescribed by Dr. Jackson, every three hours : evolution was accomplished in a week, child born at full term by the head.

VIII.

March 2d. 1871. Mrs. H. expecting confinement in a week, trunk presentation, back in front, head to the right. Pulsatilla 30, in solution every six hours. At the end of five days evolution nearly accomplished. At five days later she was delivered by the vertex, after short labor.

IX.

March 15th. 1871. Mrs. McL. expecting confinement daily breech presentation. Pulsatilla 30. In three days examined found the vertex presenting; delivered on the 23d. with rapid labor, child born by the head. Fourteenth trial by Pulsatilla, states Dr. Jackson, resulting with perfect success but one, in which Pulsatilla had been omitted some time before delivery, after a trunk presentation had been converted into a foot.

X.

By Dr. A. W. Woodward of Chicago, Med'l Invest., Vol. VI, P. 139.—Mrs. R. with fourth child large, muscular woman, two weeks' previous overtaxed herself in lifting, and subsequently felt no motion; was taken in labor at 12. M., with severe pain until 7. P. m., when seen. Examination:—os so high the hand had to be introduced to reach it; it was closed though soft and dilatable, unchanged during pain. By external examination uterine tremor found nearly transverse, head at the right upper side, pelvis and feet in the left. During pain the doctor could feel the contraction to be transverse, longitudinally with the tumor. Pulsatilla 2nd, in solution in water, after every pain for an hour. At 8. P. m. a gradual correction of the shape and position of the uterine tumor; medicine continued another hour; position fully corrected; long axis of the tumor in the median line, os descending, dilation one inch. The head presenting, pains much less frequent and less severe, patient sleepy.

At 6. A. m. found the woman delivered, having been awakened from a five hours sleep by pains which did not leave her till the child was born in about five minutes.

XI.

Dr. W. H. Burt, in *Med'l Investig* ; Vol. VIII. May. P. 71, gives the case of a woman who two years before, had born a child with presentation of the feet. She had now, February 21st, a cross presentation with the head in the left iliac fossa. The form of the child could be traced with eye and hand. The mother said the child had lain in that position during the whole period of gestation. I quieted her mind as much as possible and said I would give her something that would turn the child, and gave Puls. 30, about thirty small pellets dry in the tongue, and left the case, never believing that Pulsatilla would change the child's position.

February 27th. I was called and to my great astonishment found the breech in the epigastric region, the head in the first position and labor progressing naturally. I asked the lady if she could tell when the child turned to the natural position ? She replied, "Oh yes, in less than half an hour after taking the dose of medicine, there was a great commotion in the womb, and the child turned with his feet to my stomach."

XII.

Dr. W. F. Dodge detailed the following case in the *Med'l Investig*, Vol. VIII, P. 80 : Mrs. B. of bilious lymphatic temperament. Melancholy a Nux patient, has four children ; always troubled with labor for two or three days ; had lost two children with hydrocephalus. She was found sitting in a chair. She said. "It is not right ; it is accross, the head is here," putting her hand on her left side ; the os was found undilated. There was without doubt mal-presen-

tation, I gave Pulsatilla 2nd and awaited results, expecting a tedious time. In about half an hour she gave a scream, drew a long breath and exclaimed. "The child is turned," went to bed and in four hours was delivered of a healthy living child.

XIII.

Dr. H. W. Martin, in 1866, had a case of labor in which he thought he detected a shoulder presentation ; gave a dose of Pulsatilla 200, and went after Dr. M. L. Kenyon. On returning, the woman said that the medicine had produced a great commotion in the abdomen. Dr. Kenyon found the vertex presenting, and the child was born in fifteen minutes.

XIV.

Dr. Kenyon stated that having a case of breech presentation—it was a boy, as he could feel the genitals he gave Pulsatilla and went home, and returning in a short time the woman complained that a great commotion had occurred in her abdomen. He quickly made examination, the pains being urgent, and received the head of the child in his hands, it being as predicted a boy.

XV.

Dr. Baylies' case : I was called September 6, 1873, at 11-30 P. M. to Mrs. S., a black-haired brunnete, who had suffered severely with pains, attended by great anxiety and apprehension, since 6 A. M. The wall of the uterus acquired no tonic of firmness during the pains, which were without expulsive effort. On digital examination, the os uteri could not be distinctly felt, but a tuber ischii just within the brim of the pelvis, near the left acetabulum. By palpation through the abdominal wall, I traced the child from above the brim of the pelvis, on the left, to a point above the crest of the mother's right ilium, where I unmistakably grasped its head,

the back of the child presenting towards the anterior uterine wall. I prescribed Pulsatilla 200, in half a glass of water, a teaspoonful every two hours. Was called in haste the following morning at half past four o'clock, and found the patient in active labor, the pains regular and efficient, the child's head occipito anterior in the upper strait. The birth was completed and placenta delivered at 5. 30 A. m. The mother stated that she felt a turning of the child after the second dose of Pulsatilla. She had formerly required Sulphur, though not recently, for head symptoms and hemorrhoids; was at the time of labor and had for some days been troubled with a cough which seemed to come from the upper sternum, and caused soreness in the abdomen. Without regard to the malposition and the inefficient pain, her temperament, fretful and morbid state of mind and the cough from the upper sternum might have suggested Pulsatilla.

—*Medical Advance.*

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To be continued.

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THE INDIAN HOMEOPATHIC REVIEW.

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[No. 7.]

NEEDS OF HOMEOPATHY.

It is meet that we should look at the state of Homeopathy in this country once in a while. The labours of the late Doctors Beharilal Bhaduri, Leopold Salzer and Mohendralal Sarkar have reaped a harvest the fruits of which we are still enjoying. As custodians of the beneficent system of treatment of Hahnemann, it behoves us to look at the welfare of humanity as well as of this system of treatment.

It is indeed true that from a stray practitioner here and there we can count our number by the scores to-day. Some of our practitioners hold a very high position in society and enjoy a very enviable reputation and quite a lucrative practice. Now it remains to be seen whether we are doing all that is in our power for the welfare of our cause or are we satisfied with our own personal gain and happiness. Some of the lay practitioners also have an extensive practice and a very good income. We cannot blame these gentlemen nor can we expect much from them. A lack of systematic training prevents them from doing anything for a common cause. Still we frequently find many of them

doing a great deal for the cause of Homeopathy ; but what are we to say when we find our regularly qualified physicians, I mean the graduates of the Calcutta Medical College here as also the graduates of foreign Colleges and Universities sleeping over the matter ? We make bold to say that many of them, nay, most of them, are content to lead an easy and happy life for themselves by having a good practice of their own and allowing Homeopathy to go to the dogs. In this connection we beg to draw their attention to the following lines from the Presidential address of the last meeting of the American Institute of Homeopathy and call upon our brethren to wake up and do something for the cause of Homeopathy.

President Royal S. Copeland in his splendid address at the meeting of the American Institute of Homeopathy at Kansas City said—

“In Homeopathy, humanity has the priceless secret, the key to the shackles of disease, the relief from the bane of the ages. This has long been the testimony of our own school of practice, it has occasionally been admitted by a broad-minded and observant man of the other school, and this past twelve months especially has been widely discussed in scientific bodies, and the homeopathic ideas, if not the name, are now practically accepted by the dominant school. In the language of the bright-winged angel of olden days, we ‘bring you good tidings of great joy, which shall be to all people.’ In Homeopathy is healing for the nations. With joint ownership in all the marvels of surgery, in all the products of the laboratories, in all that the sciences collateral to medicine have determined—with joint ownership in all these, Homeopathy has been sole possessor of the knowledge of remedial application. When surgery has been helpless, the laboratory impotent, and general science hopelessly at sea, Homeopathy

has gone on, serene in the conviction of cures impossible by other methods. Practitioners of our faith are everywhere, our hospitals are increasing in numbers and influence, our asylums, homes and dispensaries are without end; the records are open and the results of our practice speak for themselves.

"But the homeopathic profession has no wish to make selfish use of its knowledge. As the momentary ambassador of this great profession and in the name of Samuel Hahnemann, I freely confer upon all physicians, of all schools, of all creeds and colour, of all nationalities and languages, a boon greater than scalpel or forceps, greater than anæsthetic or anodyne, greater than hypodermic or application, greater than lotion or emollient, the knowledge of the homeopathic materia medica, and the rights to use it in its original purity. By authority of his living heirs, I divide with you our inheritance and receive you as sons and daughters, with ourselves, of our father in the faith, Samuel Christian Frederick Hahnemann."

REPERTORY IN INSOMNIA.

(Continued from page 192, No. 6, Vol. XVII.)

CAUSATION.

Anger—Aconite, cantharides, colocynthis, ignatia, lyco-
podium, nitric acid, nux vom, staphisagria ;

Anguish.—Aconite, agaricus, alumina, antimonium crud,
bryonia, conium, digitalis, graphites, ignatia, lachesis,
mercurius vivus, nux vomica ;

Dreams, from : Aconite, agnus, argentum nit., bella-
donna, bryonia, mercurius, nux vomica, plant. •

Of animals : Aloe, arnica, belladonna, hyosciamus, hydrastis, puls, sulphur.

Of falling : Aconite, aurum met., antimonium, china, digitalis, hepar, merc. corr, nux mos., opium, sepia, sulphur.

Of spirits : Æsculus, atropin, belladonna, canth., caust., cocculus, kali carb, opium, sepia, silicia.

Fear—Aconite, aloe, argentum nit., belladonna, calcaria, causticum, china, coffea, gelsemium, hypericum, nux vom, lycopodium, opium, phosphor. acidum, pulsatilla, staphisagria.

Grief—Cocculus, colocynthis, ignatia phosphoricum acidum, pulsatilla, staphisagria.

Insanity—Aconite, arsenic, belladonna, berberis, bryonia, calc. carb, coca, china, cimicifuga, coffea, digitalis, ferrum, gels., glon, hyos, kali brom, lach, lycopodium, macrotin, melilotus, nux vom, rhus, sepia, silicia, stram, verat vir.

With confusion : Agaricus, alcohol, anacardium, argentum nit., belladonna, cannabis ind, hyos, kali bi, opium, stram.

With exalted ideas : cannabis ind, cuprum, belladonna, platina, plumbum, stram., sulph., verat. alb.

With laughter and carelessness : Agaricus, cann. ind., cocculus, hyos, lach, lycopodium, nux mos, stram, sulph., verat alb.

Joy, excessive—Arg. nit, arsenicum, calc. carb, carbo veg., cham, coffea, china, nux mos.

Melancholy—Aconite, alumina, antim. crud., argentum nitr., arnica, arsenic, aurum, bryonia, cactus, digitalis, helleborus, hyosciamus, ignatia, lycopodium, moschus, natrum mur, nux vom, opium, plumbum, podophyllum, pulsatilla, sepia, stramonium, sulphur, tarant, thuja, veratrum viride.

Pain—Aconite, ammonium carb, aurum, belladonna, bryonia, colchicum, dulcamara, glonoio, hydrastis, liliu

tigr., lycopodium, mercurius viv., nux mosch, nux vom, opium, plumbum, pulsatilla, silicea ;

Boring : sharp—Aconite, apis, belladonna, bryonia, china, lach, merc, nux vom ;

Burning—Aconite, arsenic, berberis.

Dull heavy—Arnica, ledum, lept, phos acid, rhus.

Sticking—Aconite, apis.

Throbbing—Belladonna, kali carb, kali iod, hepar, mercurius, silicea, sulphur ;

Salvation, fear of—Lycopodium, pulsatilla, sulphur, verat. alb ;

Sorrow, care—Aconite, ammon carb, bella, bryon, cactus, calc. carb, hyos, lil, merc. viv, natrum mur, nux vomica.

Suicidal tendency, with—Arsenic, aurum, bella, carbo veg, caust, china, helleborus, hepar, hyos, lach, merc., nitric acid. nux vom, puls, rhus, sepia, spig, stannum, verat alb.

Time (variable)—Aconite, arsenic, aurum, bella, bryon, calc. carb, calc. phos, cham, china, cimicifuga, coffea, helleb, hepar, hyos, kali brom, lach, lycopodium, melilotus, merc., nux mos, nux vom, phos, puls, opium, rhus, sepia, silicea, sulph, verat. alb.

Before mid-night—Aurum met., carbo veg, kreos, merc. viv, opium phos, puls, rhus, ran bulb.

After midnight—Aconite, arsenic, aurum, caps, coffea, ferrum iod, nux vom, silicea.

1 A. M. wakes—Arsenic, kali carb.

2 A. M. wakes,—Kali bi, nitric acid, nux vomica.

3 A. M. wakes,—Arsenic, bapt., bella, calc. carb, kali carb.

4 A. M. wakes—Plant., verbescum.

Wakes frequently, falls asleep easily—Aconite, agar, arsenicum, aurum, bell, cham, coffea, hyos, ignatia, phos, rhus, ruta.

CAUSATIONS (MINOR.)

Acute diseases, convalescent—Coffea.

Anxiety—Aconite.

Ball in the throat sensation—Stillingia.

Body scattered about (sensation of)—Baptisia.

Burning (ocular) : Eugenia, kreos, podo.

Caprices, phantasies—Phos., sponsia.

Circulation, excited—Aconite, bryon, melif, verat. vir.

Coition (after)—Copaiva.

Coldness, hands—verat vir, carbo veg.

Feet—Calc. carb., carbo veg., nitric acid, silicea.

Constriction (gastric)—Cocculus.

(thoracic)—Conium, senega.

Conversation, lively—Hepar.

Coughing—Sticta.

Cutting (and drawing) in loins—Mag. carb.

Depressant causes—Ignatia, sulphur, natrum mur.

Dilatation (ordiac)—Tabacum.

Discomfort (in any posture)—Lycopodium.

Electroid shocks—Arg. met., opium, verat vir.

Excitement, nervous—Hyos, moschus.

Fear—Acon., rhus.

Figures (sees)—Sulphur, phos acid.

Formication—Guacum, secale.

Friends (loss of)—Ignatia, puls., lach., stram.

Gluttony—Nux vom., puls.

Hallucinations—Bella., cham., hyos., opium, stram.

Heat—Bryon., puls., merc., nux vom.

(loins)—Kreos.

(palms and soles)—Lach., sulph.

Homesickness—Capsicum.

Itching—Anac., sulph., dulc.

(arms)—Aloe.

(thighs)—Ran bulb.

Irritation chronic cerebral, with pulsation in throat and body—Gels.

Menstruation (during)—Amm. carb., natr. mur., mag. mur.

(with soreness of mouth)—Arum tri.

(with thirsty sensation)—Sepia.

Nervousness—Coca, colch.

Night wathing—Cocculus.

Noise, which wakes him—Oxalic acid.

Opiates, after—Cimicifuga, nux. vom., secale., stram.

Pain—Conium., phyto., stram., magnesia, sulph., carbo. an.

(in face)—Plantago.

(in loins and head.)—Berberis.

(intercostal spaces with anxiety) Ran. bulb.

(invertex)—Aconite, bryonia.

(before midnight)—Arsenic.

Palpitation, violent—Benzoic acid.

Pelvic troubles—Plantago.

Portal, circulation, disturbance of—Mercurius.

Poverty, fear of—Ant. crud., calc carb., clem., fluoric ac., graph., lach., nux vom.

Pregnancy—Bell., cham., coffea., hyos., nux vom., opium.

Pulsation (stomach pit and ears)—Cactus.

Restlessness of body—Carb. veg. sulph.

legs—Rhus., verat vir., zinc.

Snuffles—Arsenicum.

Study, excessive—Cimicifuga, nux vom.

Surprise, pleasant—Coffea, scutellaria.

Thoughts (too many)—Bryonia.

Trembling—Lycopodium.

Uterine affections (exhausting)—Cypripedium.

Visions (as soon as eyes close)—Camp., spongia, thuja.

Voluptuous sensations—Nux vom.

Worms (children)—Ferrum.

Insomnia alternating with sleeplessness—Camp.

Insomnia every other night—Anacardium.

—*North American Journal of Homeopathy.*

“KNAVES OR FOOLS ?” A BOOK OF THE HOUR.

The sadly vulgarized phrase, “up to date” may yet, on occasion, be an apt and honorable one. As such, it will be found peculiarly applicable to a little book which, newly issued from the press of John Hogg, of London, and supplied by Boericke & Tafel of Philadelphia, deals soundly, sympathetically, illuminatingly and convincingly in the thought and in the phrase of the present hour, with the question of the claims of homeopathy on modern medicine. The book in question is “Knave or Fools ?” by Charles E. Wheeler, M.D., B.Sc., of London, England.

The title of the book is the only thing about it which suggests exaggeration, verbal or otherwise. Its thought is singularly sequent and lucid ; its phrase simple, vigorous and effective. Its title is derived from the author’s argument that opponents of homeopathy must regard converts to homeopathy as either knaves, fools, or men whom experiment will justify in the course they are pursuing. His exposition of the thesis affords an excellent example alike of his reasoning and of his style. Says Dr. Wheeler :

“The strongest part of the case for homeopathy is that its practitioners are so often men who have been converted from the ordinary methods, in spite of the price exacted for conversion. There are only three possibilities open. First, that they are honestly mistaken, that they are fools. But how can this be decided (as it is claimed to be decided) by men who have not made the necessary experiments ? Science admits no *a priori* reasoning, when experiment is available. Second, that they are not convinced, but pretend to be, that they are knaves. Again, the only arguments used are theoretical, and the difficulty of accepting this explanation becomes

enormous on investigation. The genuine charlatan is a solitary soul, distrusting others of his kind, but homeopaths form societies and seek companionship. Further, why, if their aim is fraud, burden their lives with the task of mastering intricacies of drug action adding to their professional labors a duty of which orthodox practitioners can form no conception? Let no man delude himself that it is an easy matter to practise Homeopathy well. But if it is a fraud, why build up this elaborate structure for the sake of unnecessary toil? The explanation becomes absurd. Remains the third possibility that they are right, that they do get better results, and that they are repaid for ostracism and contempt by a sense of increased power over disease. Some may wish to insert a fourth possibility, that they are partly right and partly mistaken. This is an attitude not uncommonly adopted by more generous souls who find, to their astonishment, that homeopaths can know their work and be capable of human intercourse. It is a very dangerous attitude for the conscientious adopter. By what right does he deny to those who seek his aid the benefit of any truth there may be in Homeopathy? If once he admits that there may be, is probably, truth in it, he is condemned if he shirks investigation. It is his duty to define the limits of that truth and not withhold its power from those who trust their bodies to his care."

The story of the origin and rise of homeopathy, and the story of the scientific claims and labors of the man whose name is forever associated with its beginnings, are told by Dr. Wheeler with a brevity, a simple directness, a continual appeal to evidence, an impartiality, and a frank charm of style, that make their telling a something seemingly new. In this hour when medicine as a whole, face to face with popular questioning and criticism, no less than with pessimism candidly outcrying from its own inmost citadel, must establish new claim on public confidence or risk the loss of that confidence altogether, it behoves medicine to strengthen its case by welcoming every honorable, efficient ally. The proved claim of homeopathy to being such an ally, is a very timely thing to set forth, in form befitting the hour, for the very serious consider-

ation of the hour. And this Dr. Wheeler's little book does, to utmost admiration. Giving scarcely more than an hour to its perusal, he who will may gather from it an accurate, tolerantly-presented summary of the facts concerning homeopathy and its founder which have been too long and often too obscured and distorted by traditional prejudice, on the one hand, and traditional partisanship on the other. No better service can be rendered to the homeopathy of the hour than by urging Dr. Wheeler's book on the attention of every fair-minded student of the medical signs of the times.

We append a few citations from the many examples the book affords, of admirable re-handling of material which too many, even among homeopaths themselves, have been inclined to look on as outworn. We are sure our readers will agree with us that Dr. Wheeler's qualification of Hahnemann as one who "detested vagueness of thought and slovenliness of statement," is a qualification singularly applicable to Homeopathy's present expositor and propagandist.

Speaking of Hahnemann as a medical student, Dr. Wheeler says :

"But in no respect does he show more clearly his intellectual superiority to the ideas and practice of his day than in his treatment of the insane. At a time when torture and chastisement were the accepted methods of dealing with mental disorders, Hahnemann writes : 'I never allow an insane person to be punished . . . and they are always rendered worse by rough treatment, and never improved.' In 1792 he cured, by his humane method, Klockenbring, a distinguished man at that time, whom the usual brutal treatment had (not unnaturally) failed to relieve. He won considerable fame thereby ; but the opposition which soon after was roused by any mention of his name prevented the full benefit of his reasonable views of insanity from affecting general treatment, and by the time the methods of Hahnemann had become commonplaces of medicine his name suggested to ordinary ignorant opinion rather the subject than the physician for mental therapeutics. But if Hahnemann was in advance of his age in his ideas for the treatment of the

insane, he even more markedly anticipated later conclusions in his suggestions for dealing with epidemics. Years before any publication of 'germ theories' he is found preaching the necessity of compulsory notification and isolation of infected persons, the value of abundant fresh air and the dangers of conveying disease by clothes and excreta. Indeed, it is not too much to say that his practical common sense led him to conclusions that would serve as a useful guide to public health authorities today.

... If then, it be held desirable to heal this breach of a century's standing, obviously the move must come from those in whose hands remain practically all the prominent posts, all the academic positions and nearly all the public influence. Homeopaths have nothing to offer, save the frankest recognition (if they ever withheld it) of the benefits conferred on the profession by work in other departments than their own and the acknowledgment that once Homeopathy becomes a recognized province of medicine, the need disappears for the special designation. It would be enough to keep alive the memory of a great man by attaching the name of Hahnemann to hospitals and societies and journals consecrated to special effort along the path he pioneered. Whatever sectarianism is bound up with the name of Homeopathy could be banished. But to achieve this more is needed than the good will of homeopaths. What do they ask of the orthodox, the great body of the profession? Not, be assured, any recognition whatever founded on sentiment however noble. Justice is a fine name to invoke, and history may well admit that Homeopathy has had less than its share, but no permanent union can come from anything but mutual sense of advantage. Therefore, let the profession give nothing but free and full investigation. But no commissions of enquiry, no committees of research are sufficient. They can bind no one but their members to conclusions when every man can be himself an investigator. The thing needed is to remove the stigma from the name of homeopaths and encourage every physician to make trial of the law of Hahnemann in his own practice. To this end, let there be three authoritative statements: First, that

Hahnemann was no shallow, fanatical dreamer, but a physician whose experiments are worthy of repetition and his theories of experiment. Second, that even although homeopathsists should be proved by larger experience to be in the main mistaken, yet the direct and indirect effects of their teachings have been such as to suggest that there is at least a germ of truth in their opinions, and that it is incumbent on every man to define that germ for the benefit of the profession and of humanity. Thirdly, that the man who devotes time and labor to this branch of *materia medica* and its practical application deserves well of the State, and that facilities should be given to students and academic reward allotted for proficiency in this field of endeavor . . .

. . . "These are the salient features of the life and work of Samuel Hahnemann. Surely it is evident that, however mistaken, he was no shallow dreamer, but a learned and laborious investigator, following truth as best he could, by no path but that of trial and the patient record of result. No wonder the mental balance of his contemporaries was disturbed by teaching so revolutionary. Small wonder that they preferred vituperation to argument and dogmatic assertion to experiment. Hahnemann faced the experience of all pioneers, and though the reception of his doctrines does not demonstrate their truth, history confirms the belief that new truth has seldom been met in any other fashion. By now the bitterness of controversy is passed. Differ from him as we may, no one can deny that he has left an indelible mark on medical practice. Is it not possible at last to see him clear of the mists of passion, and confess him one who toiled with no small effect in the cause of suffering humanity ?

. . . "When Dante stepped at last through the last barrier of fire and rock into the Earthly Paradise, after sounding the depths of Hell and climbing the steepes of Purgatory, Virgil bade him thenceforward go on a free man, king and priest over himself. No man ever valued true authority more than Dante, and obedience to rightly-constituted rulers, temporal and spiritual, was the keystone of the arch of his world organization ; but he knew that for

the perfect man there could be no king and no priest, and crown and mitre must rest upon each man's brow. So Medicine must learn her final lesson. Made up of human units, each must be in his way perfect, that she may be perfect, and no perfection is possible till the principle of personal responsibility, fortified by patient, personal effort, is substituted for the easier principle of acceptance of authority. Let the truth justify itself to each man according to his capacity unimpeded and unaided by the weight of any dogma. Then there will be no contest except for clearer vision, no recrimination, since no desire except for further light; error will be known for human weakness, to be corrected without anger and made the basis of future truth, and truth will be doubly precious, because accepted by reason and not alone by faith. Then, indeed, shall there be a profession of which its members shall be proud; then, indeed, shall it stand like the greatest of the poets in the Earthly Paradise.

Puro e disposto a salire alle stelle.

—*The New England Medical Gazette.*

CERTAIN CHRONIC CATARRH.

BY DR. L. STERNBERG, BERLIN.

In our practice we find now and then complications of a simple cold, which prove very painful and dangerous, and at times even require surgical operations. These arise from the passing of the nasal catarrh to the cavities which are in direct communication with the nostrils. These cavities, enclosed by the bones of the cranium, are the maxillary cavities, called also the antrum of Highmore, the frontal air sinus, and in a certain sense also the two tympanic cavities. Although these latter can hardly be said to be auxiliary cavities of the nose, they may still be included within the scope of our presentation, owing to the danger to which they are exposed from diseases of the nose.

Their connection with the main cavity, as we may denominate the nasal cavity, is direct, and these cavities are also covered with a tender mucous membrane, so that catarrhs of the nasal mucous membrane, whether arising from cold or through the effect of infectious matter (diphtheria), may freely be communicated to it. Nevertheless their communication with the main cavity and through it with the outer world is too limited to be sufficient to discharge any great amount of pus that may gather. Thence comes the great danger from the formation of pus in these firmly closed cavities, especially in the cranial bones, where this is yet increased by the proximity of noble organs ; the antrum of Highmore being close to the eye, the frontal sinus and the tympanic cavity close to the brain. For if the pus has not a free egress, it makes its own path. We must not overlook the fact, that although the bones themselves form a pretty firm protecting wall, there are breaches through them in the form of the very fine passages which serve for the entrance of the blood vessels which enter into the bones to afford them sustenance ; these points also are the source of danger in infected wounds of the head, which are apt to cause diseases of the brain, even where the cranial walls themselves have not suffered lesion.

From this it would follow that even in slight cases of catarrh we ought to have in mind the secondary affection of these auxiliary cavities, and that we should be careful to ward off any transition into a puriform variety, which might necessitate a surgical operation.

It may, therefore, be useful to enumerate here the chief symptoms which would indicate the affection of the above mentioned auxiliary cavities. I will not here enter on the participation of the middle ear in such catarrh, since, with respect to them, I may refer to a previous article on this

subject in this journal. Diseases of the maxillary cavity are usually indicated by the painfulness of the cheek and of the whole half of the face affected ; this is always especially increased by touching the region of the roots of the upper molars ; if this disease progresses, it will be indicated by the swelling of the skin or of the half of the face, and by fever and shaking chills.

When the frontal air sinus is affected we find an extremely violent frontal headache, especially at the root of the nose, later on in the protuberances of the forehead, also a swelling of the skin on the forehead and the region of the root of the nose ; so also fever, shaking chills and when there is a danger of effusion on the brain, we shall find symptoms showing the affection of this centre, vertigo, nausea, convulsions, etc.

But it should not be allowed to come so far, and this article is written to advise the consultation of a physician as soon as the auxiliary cavities become painful in the course of a catarrh or any other disease of the nasal cavity. Only a physician will be able by means of a thorough examination and by the consideration of the totality of the symptoms to give the correct diagnosis, and by taking the trouble at the right time, to check as far as possible the progress of this process.

I was induced to write this article by the favorable and rapid cure of three cases, especially also by the belief that I owe my success to a homeopathic remedy, which seems to be almost a specific in these cases of disease. In all these three cases, as I would at once premise, the trouble was not catarrhs of a puriform nature, but proximately simple inflammatory catarrh, with rather sparing secretion.

I. The first case was especially interesting, because the severe cold of the patient had been followed by the inflammation of the conjunctiva on both the eyes, for which she was

treated for months by a specialist without the least success, so that he expressed the supposition that the trouble was of a rheumatic or neurotic nature. The painfulness of both the maxillary cavities, the close connection and sequence to a cold, the otherwise sound constitution of the woman, and especially the success of the remedy, which in four weeks cured a disease which in spite of continuous treatment had already lasted for a year—all led me to the conviction that the inflammation of the conjunctiva was the result of the catarrhal disease of the cavities of Highmore.

II. The second case offered nothing peculiar, as the symptoms here plainly indicate "catarrh of the maxillary cavities." It was a fresh case, which was checked in a few days, although it had already caused the swelling of the corresponding side of the face.

III. The third patient had already passed through three operations with yearly intervals on account of abscesses of the frontal sinus. With him I was able at his fourth attack to make a surgical operation unnecessary.

In all these cases it was *Kali bichromicum*, to which I ascribe my success, for I made no other prescription. I had frequently before had the opportunity of observing the curative effects of this remedy in old cases of catarrh of the fauces and of the nose, and I believe I can recommend it as a specific in the cases of disease of the auxiliary cavities of the nose, where there is only a slight secretion of mucous or puriform matter; it is equally effective in recent as in chronic cases, if their progress is from the beginning more of a slow and insidious nature; in violent cases *Belladonna* is indicated.

Of course, with the sharply defined symptoms of our homoeopathic remedies a specific is not to be taken in the same sense in which allopaths speak of a specific, as, e. g.,

Salicylic acid in rheumatism ; for in the disease in question there is quite a lengthy series of symptoms which have to be considered in order that we may select the right remedy. It is even quite possible that Kali bich. may be contraindicated in some cases. I would merely say so much, that in cases where we find the above mentioned symptoms this remedy deserved notice, especially in the commencement of the disease. When, however, there have been formed larger accumulations of pus in the cavities, I would not any more rely on this remedy, but rather turn to Mercurius or Silicea, in case a surgical operation should not as yet be called for to discharge the pus formed. After an operation Kali bichromicum as well as Mercurius or Silicea will be found of use in securing a full cure.—*Leipziger populaere Zeit. fuer Hom.*

A CALCAREA SULPHURICA CASE. *

BY KATHERINE KLEIN, M. D., JERSEY CITY.

Mr. M., age 54. Up to December, 1904, has always enjoyed good health, though suffering from chilblains. In December he bruised the ball of the great toe. After consulting chiropodist and physicians, who advised various salves and antiseptic dressings without avail, gangrene set in and he entered the hospital in January, 1905.

The big toe and the first joint of the next was amputated, with no relief, the wound remaining tender and swollen, with profuse suppuration. Numerous sinuses formed with well-marked demarkation.

After two months of ineffectual local treatment, he was

* Read before the New Jersey Homeo. Med. Society.

advised to have complete amputation of the foot and ankle, which he refused. He was then dismissed from the hospital. I was then called in to see what Homeopathy could do, in March, 1905.

After careful examination with consultation, wherein no subjective symptoms showed, we decided to prescribe Calc. sul. from clinical experience of the local symptoms, as follows: Foot swollen, purple, somewhat tender. Swelling extending to ankle. Sinuses discharging pus between all the toes, as well as the stumps; discharge being thick, green, foul, sloughing off in lumps.

Calc. sul. 200 B. & T.—One dose given and the wound cleaned with sterile water, then Calendula.

An apparent aggravation immediately followed, caused by the free discharge of pus. Then pain and swelling lessened, the patient resting better and gradually able to move about. This improvement lasted two weeks, then stopped.

Calcarea sul. 200. repeated—the result of which was a great surprise. The following morning, on dressing the wound, a mass of maggots popped out. From then on, the patient continued to improve, there was no more loss of tissue, healthy granulation forming in the wounds in true order of healing, the last affected being first to heal, as Hahnemann so well proves in the Organon. The amputated stumps were stubborn, but finally in three months the patient was entirely well, able to wear his shoe and walk out in all weather, without any after effect of pain or chilblain.

—*North American Journal of Homeopathy.*

THE ADVANTAGES OF HOMŒOPATHY. *

BY ANNA D. VARNER, M. D., WILKINSBURG, PA.

Homeopathy is the only system of therapeutics based upon an invariable scientific law. It was discovered in the same manner that Sir Isaac Newton discovered the law of gravitation—by observation, demonstrated by a lifetime spent in the most rigid investigation, the most exact deductions, and the most painstaking provings of drugs. So thoroughly was all this work done that to-day, with all the advantages of modern methods and aids in examination, drug symptoms recorded by Hahnemann could only be verified by the Provers' Society.

How are we to explain "*Similia Similibus Curantur*," the principle upon which the foundation of Homeopathy is laid? Were it possible to tell why two negatives make a positive; why two tones of equal vibration result in silence; why a frozen foot should be plunged into a snow-drift instead of an oven to save it, then could we also explain why a drug will cure a condition similar to that which it will produce. Like scores of other scientific truths, Homeopathy is capable of being demonstrated only by the results attained. These results were attained hundreds of times by Hahnemann before he proclaimed his new therapeutic law and so frequently has this law been demonstrated by his followers as to preclude all possibility of doubt.

Although we cannot give a reason for the action of the similar remedy, we are, at least, permitted to theorize as to how it acts.

Hahnemann came marvelously near the truth when he claimed that diseases were "purely dynamic disturbances."

*Read at a meeting of the Cleveland Homœopathic Medical Society, April 8, 1908.

of the spirit-like vital force." We, with our superior advantages in the laboratory and with the microscope, can only present a similar idea in a more conceivable form.

In the protoplasm and cells of the body are locked the secrets of nutrition, life, growth, health, disease and death. We feel convinced that the advanced thinkers of our school are right when they claim that health is a state of equilibrium maintained in the functional activity of these cells and their relation to each other. Disease is a disturbance of this equilibrium caused by an irritant within or without the body. A minute dose of medicine capable of causing a disturbance similar to that already existing is administered. The one disturbance counteracts the other, and the equilibrium is restored.

The homeopathic action of drugs, then, is an exceedingly delicate matter, hence an exact application of the similar remedy excludes alternations, combinations, or compound prescriptions. The provings have all been made with single drugs, and since most remedies have such a wide range of action, they seem peculiarly adapted to overcoming disease single-handed. Drugs in alternation would probably set up two distinct disturbances of molecular action and conflict with each other enough to retard the cure. There are no two remedies in the *Materia Medica*, no difference how similar in some respects, which are not diametrically opposite in others.

For instance, take *Rhus tox*, and *Arsenicum*, recently prescribed in alternation by a physician for a restless grip-patient. The restlessness of *Rhus* is relieved by motion, that of *Arsenic* is not; *Rhus* has its chief aggravation before midnight, *Arsenic* after; *Rhus* causes rheumatic affections, typhoid conditions and a vesicular eruption of

the skin, Arsenic produces fatty degenerations, destructive inflammations, anasarca, serous effusions and dry scaly eruptions. If one is indicated, the other certainly is not.

Remedies may complement each other ; one may take up the thread of action where the other has left off, but alternation is unscientific.

Practice in the use of the single remedy is a distinct advantage to the practitioner, for it gives an opportunity to cultivate the powers of observation, individualization, and differentiation so valuable to every physician.

The day is past for the infinitesimal doses of the Homeopath to be the object of ridicule. Potentization has two effects upon drugs. It reduces the quantity, thereby lessening the danger of aggravation, and, at the same time, by the division of the molecules, increases their activity. The more a drug is attenuated, the more active it becomes and the less frequently is it necessary to repeat the dose. We all appreciate the effect of attenuation upon such substances as Silicia, Lycopodium and the Calcareae, inert in their crude form, but in a potentized state the most powerful remedies in our *Materia Medica*.

If the basis of all life is an infinitesimal speck of protoplasm ; if the natural bodily resistance to disease is secreted in microscopic leucocytes and opsonins ; if the most virulent diseases known are caused by micro-organisms, then Hahnemann builded better than he knew when he claimed that the therapeutic advantage is with the attenuated remedy.

So much in explanation and defence of the principles of Hahnemann. We shall proceed to show how the similar single potentized remedy gives Homeopathy distinct advantages over every other system of medical practice.

In Homeopathy there is uniformity. For the same

condition, or the same group of symptoms, the same remedy is used the world over. There is variableness also, for a score of people may be suffering from the same disease, yet each require a different remedy. It produces no heart depressions, no gastric disturbances, no salivation, no metastasis of diseases, no wrecked nervous systems, no sudden deaths from over-dosing. Its absolute harmlessness, we question. Where the action is that of molecules of matter upon the cells of the body, remedies should not be given indiscriminately, nor the same remedy continued indefinitely. People who take the least medicine are the most responsive to treatment.

Homeopathy is specifically adapted to all conditions amenable to medical treatment. Whether it be a wart on the finger, a pain in the ovary, the worst form of meningitis or cholera infantum, a peculiar mental state, an inherited dyscrasia, a weak constitution, a strange temperamental condition, an unusual symptom that cannot be classified, a stage of disease too early for diagnosis, it matters not, it is possible to find a remedy that will cover the case. While the old school physician is attempting to cure a congested left ovary with a tonic, a sore throat with an alterative, a bilious attack with a physic, the skilled Homeopath selects the remedy that goes straight to the mark.

The selection of the remedy is fascinating work. Sometimes one peculiar symptom gives the clue to the whole situation. For instance, in my early hospital and dispensary experience, a woman who had been insane for almost a year, was cured by Thuya 30, three doses administered each week for six weeks. After many remedies had been tried, warts were discovered on her scalp under the hair, and on consulting the *Materia Medica*, Thuya was found to cover the case in its totality.

Another case of enlarged prolapsed uterus failed to yield to

treatment, both medical and local, until the clew to the remedy was suggested by the patient's dreams, and then Platina gave speedy relief. The striking way the picture of the drug reflects the symptoms of the patient does not come by chance. It is the Creator's foresight for the care of His people by a natural law. When Homeopathy fails in curable cases, the fault is with the prescriber or the patient and not with the method.

It is a most reliable and stable method of cure. *Belladonna*, *Rhus toxicodendron*, and *Veratrum album* are just as efficient in scarlet fever, rheumatism and cholera infantum as they were fifty years ago. As much cannot be said of any other school of medicine. Each decade finds them abandoning old remedies and lauding the new, which, in turn, they also abandon as useless or harmful.

In the stability of Homeopathy lies also its disadvantages. Some physicians have been content to confine all their endeavor to the search for the Similia. They have no special interest in modern methods of diagnosis, nor in the new discoveries in the laboratories. They are our finest prescribers and they cure many patients, but in these days when people are restless, ever clamoring for new things to do and new worlds to conquer, the laborious search for the indicated remedy does not appeal to all of the young members of the profession. They use the homeopathic remedies in a routine manner and they fail. Perhaps they have not been taught the best there is in Homeopathy. At any rate the kaleidoscopic conditions of the allopathic school allures them. Its continual changes seem progressive, and we are confronted with the facts presented to us at Atlantic City in 1906, that the number of students in the homeopathic colleges is on the decrease.

But why should any reasonable person turn from that

which is, to that which is not, but eventually will be? It would seem like exchanging a butterfly for a cocoon, or a frog for a polly-wog. If we are at all adept in reading the signs of the times, the advance guard of medical and scientific men are on the high road to Homeopathy. Every new theory advanced in the cure of disease leads a little nearer to the similia. Every important discovery in science substantiates the principles of Hahnemann.

The X-ray demonstrates the increased power of a highly attenuated form of electricity. Radium, with its emanations continuing year after year, with no appreciable decrease in substance, indicates that we do not yet understand the extent or influence of the divisibility of matter. Both X-ray and radium seem harmless, produce no sensations of heat, pain, or contact—yet they are extremely dangerous. Destructive of tissue themselves, their therapeutic effect is upon diseases which produce a similar destruction.

Trudeau, of Saranac Lake, takes the apparently useless Tuberculin, attenuates it in precisely the same method as taught by Hahnemann, and in doses of one ten millionth of a gram, finds it an active principle in the treatment of tuberculosis. Horace Fletcher teaches that food should be chewed until thoroughly attenuated before being swallowed, claiming less food is required and the cells more readily absorb the nutrient matter.

Von Behring was criticised for statements he made in a public meeting, "lest his words prove grist for the mill of the Homeopaths." Von Behring replied he was seeking the truth and wherever it led he would follow.

Creosote has been condemned in phthisis because it interferes with nutrition. Strychnine has been weighed in the balance by the sphygmograph and found wanting in heart failure. The much lauded internal antiseptics in fevers has

been pronounced worthless. Osler himself has lost faith in drugs.

Cabot acknowledges that the tendency in therapeutics is towards "*Similia similibus curantur*."

Wright guided by his opsonic index, teaches the futility of local applications and internal antiseptics and claims the only really beneficial way to treat, at least, the germ diseases is to raise the opsonic index, in other words, to increase the bodily resistance to disease. He advocates curing the disease by the product of the disease, which is but a step removed from Homeopathy.

Watters, the 'greatest pathologist in the homeopathic school, is engaged in the same kind of work. With his microscope, he observed the opsonic index rise after every dose of *Natrum sulphuricum* 200 until the patient suffering from chronic diarrhoea was cured.

Truly we have come to that future time prophesied by Wesselhoeft thirty years ago, "When we may enjoy the privilege not only of contemplating what we have cured, but also how it was done."

Homeopathy has had a great past. It will have a greater future, and part of that future is ours.

A great field of opportunity and research work lies open before us. It is ours if we choose to go in and possess the land of promise.

There is no reason why we should not have in our school of medicine, not only the best prescribers, but the best surgeons, the best diagnosticians, the best pathologists in the world. There is no reason why we, as a school, should not take an advanced stand in the prevention of diseases, anti-tuberculosis work, and better sanitary measures.

An institute for research work should be equipped and endowed by money possessed by the adherents to our faith.

And there the work suggested by Dr. Watters could be carried on, on a larger scope. It seems probable the potency question, the vaccination dispute, and all old and new methods of cure could there be for ever settled.

It would be pity if, through our own indifference, we fail to grasp the golden opportunity and allow the fame, which should be ours, to be acquired by the dominant school; for Hahnemann was not a theorist, he was a thinker; not a dreamer, but an investigator; not an inventor, but a discoverer, and "the discoveries of great men never leave us; they are immortal."—*Medical Century*.

Clinical Cases.

I.

Babu Jodunath Roy, aged 21, a hard-working student, thin and of anæmic appearance, came to me for dyspepsia from which he has been suffering long.

Had alternate diarrhœa and constipation which caused much weakness.

Had nervous debility and spermatorrhœa for sometime. It is due to hard study and night-keeping.

Much flatulene, extreme prostration. Digestion was defective, stools were yellow, thin and fecal, generally aggravated in the morning before breakfast. Had been subject to nocturnal emissions for sometime. Nux mosc. 30, morning and evening for one week.

Improvement was very slight. I gave him Nuphor lutea 6x, thrice daily and it had a mervellous effect. Not only the diarrhœa and constipation gone but there was perceptible improvement in the strength and digestion. His nocturnal emission was almost nil. In two months' time he was a quite changed man, hale and hearty.

II.

Mr. S., a Madrasi gentleman, came to consult me about his gonorrhœa which was giving him trouble for the last ten days. He used some medicines and cooling drinks, but these aggravated his case.

Intense burning in making water; frequent calls for urination, urine scanty and high-colored, sometimes with bloody discharge of mucus white and thin. Constant strangury. He was in robust health always. Cold always aggravated his every kind of suffering.

Cantharis 30, one dose every morning. Three doses he took and pain, burning, frequent micturition—all disappeared. But the discharge still continued. Some other remedies had been tried to no effect; ultimately a few doses of Natrum sulph 30 completely restored him to health.

III.

Miss Beck, aged 22, robust-looking, had been suffering from a irregular menses. It came on regularly but scanty and lasted two days; blood dark.

She was subject to catarrh every month during menses. Heavy head, running of water and feverish.

Got shooting pain now and then, but the whole sexual region tender on pressure, more on the regions of the ovary and uterus. Sometimes whitish discharge. Tenderness more on the left ovary.

Very much constipated. No other complaint.

Graphites 30, one dose a day.

One week's use of the medicine gave her some relief. Bowels became regular, one natural stool every morning. Improved in general health.

No medicine the next week and the patient was the same as before.

One dose of Graphites 200 four days before the menses.

Menses came on in time and pain much less. The discharge was more in quantity and of good color.

No medicine for a fortnight; after that one dose of Graphitis 200.

Better in every respect. The next menses regular in time and quantity and painless. Bowels regular. The white discharge disappeared altogether. She was perfectly cured and remains so upto date.

IV.

Babu Narendra Nath Ghose, a robust young man of 32, had been suffering from fever off and on for six months. He took all sorts of medicines, allopathic, kobiraji, and even homeopathic, without any permanent benefit. Fever was of an intermittent character, came on generally in the afternoon at about 3 P. M. with slight chill, hands and feet cold. Heat prolonged all over the body, especially there was burning sensation in the palm of the hands and soles of the feet. There was also burning in the eyes.

Not much thirst, only dryness of mouth. Tongue clean, bowels generally constipated, hard knotty stools. Fever left him without perspiration.

There was slight cough and he was subject to cold and had catarrh of the nose very frequently.

No enlargement of liver and spleen. A dose of *Azadiracta Ind 30*, every morning on empty stomach for three days.

The next day his burning sensations were much less but the fever came as usual. He said his suffering was considerably less, had better stools and fever was gradually getting less in intensity and duration. His appetite became improved and strength was returning.

No medicine for four days. His fever subsided but still there was slight burning of eyes noticeable by him in the evening.

One dose more of Ajādirecta removed this sensation and he was all right in a few days.

BOTULISM AND BUTULINUM.

BY DR. WHEELER.

Every symptom complex that can be referred to as a constant and well-defined cause, and thus classified as a distinct disease, is an advance in knowledge for the whole medical community, and if the cause is a toxin the homeopath feels a special interest in the knowledge that every poison is to him a new weapon, so that precise knowledge of a new foe brings with it knowledge of a new defence. Botulism is exactly a new disease, although well-defined cases of it are not common in England, or at any rate are not commonly identified and classified but the prospect of using the disease toxin as a remedy has an important interest for us, and a short statement on the subject is therefore desirable. Dr. Aug. Schepens, of Mouscron, Belgium, has obtained the toxin, through the kindness of Dr. Van Ermengem, of Ghent University, and has been the first to record any use of it as a remedy. The following account of the disease and the remedy is taken mainly from two papers by him, published in the journal *Belged' Homeopathic*, and one by Dr. Eng. de Keghel in the same journal.

Botulism is classified under the heading of meat poisoning. The bacillus botulinus was isolated by ~~Dr. Van Ermengem~~ from a ham which poisoned forty persons—members of a musical society at Ellezelles. It is a large ciliated bacillus and anærobic. Meat infected by it has no putrid odour, though a characteristic rancid smell is described. Fish as well as any sort of preserved meat may form a suitable medium for its growth. The toxin is very active. Its composition is unstable; a temperature of 80° C.

decomposes it as do also alkaline solutions; acids affect it less quickly. It is insoluble in alcohol and ether, and its action is neutralised by oil and fat, consequently it is the lean and not the fat of infected meat that is dangerous. The symptoms of poisoning set in twenty four to thirty six hours after taking the infected material. Vomiting is usually the first symptom, but the gastro-intestinal tract is as a rule comparatively little affected in patients attacked by the bacillus botulinus and its toxin, who thus differ from the meat poisoning cases due to bacillus enteritidis or proteus vulgaris. In fact, there is generally constipation rather than diarrhoea. Following the first vomiting a train of nerve symptoms develops—ptosis, mydriasis, strabismus, paralysis of accommodation, general muscular weakness, successive dryness and hypersecretion of the buccal and pharyngeal mucous membranes, dysphagia, aphonia and retention of urine. The symptoms last weeks, even months. The mortality varies from 8 per cent. to 10 per cent., and death is accompanied with symptoms of bulbar paralysis. There is no fever or impairment of intelligence. The symptoms in animals poisoned with toxin correspond closely. Repeated suffocative attacks have been often observed and after large doses, convulsions. Postmortem, the lesions found are such as the symptoms would suggest, engorgement and minute hemorrhages followed by fatty degeneration of the motor centres of the pons, medulla and spinal cord, and of the nasopharynx, salivary glands, liver, kidneys, and muscles supplied by the affected nerves. The immediate treatment is to eliminate any unabsorbed toxin by washing out the stomach with slightly alkaline solutions (as alkalies destroy the toxin.) Rectal injections with the long tube should also be used. Ether is recommended, and Dr. Schepens suggests that ether has an elective action on the respiratory centre.

and is useful for this reason. After immediate measures have been taken the most obviously indicated remedy is Belladonna, Bryonia, Rhus, Sulphur, Agaricus, Ac. hydrocyan, Lachesis, Ant. tart., Arsen, Phos., and Tabacum are all remedies that may find a place in the treatment of one case or another.

The therapeutic applications spring from the recorded symptoms. The drug is to be thought of in hydrophobia, bulbar paralysis and allied affections, diphtheritic paralyses, and the dyspneic attacks and coma of diabetes, especially remembering Claude Bernard's classical experiment of producing diabetes by lesions applied to the floor of the fourth ventricle, a site for which Botulinum seems to have a special affinity.

Paroxysmal dyspneas occurring in various diseases in so far as they are central in origin, should be aided by Botulinum, and it is interesting to note that it is precisely repeated attacks of dyspnea that Dr. Schepens has found himself able to cure with the drug. His first recorded case is that of a lady of 70, with arterial sclerosis, slight albuminuria, and a small pleural effusion, who suffered from nocturnal dyspneic attacks of an alarming kind. Phos., Ars., Lach., Spong., and Hyos. all did little or nothing. After fifteen days Batulin 30. was given, one dose. Short aggravation followed by amelioration ensued. The dose was repeated in two days' time, and the same phenomena occurred, but the improvement was more marked. In another two days another dose, and no more, was required. Nine days from the first dose the effusion had disappeared, and albuminuria and attacks of dyspnea followed suit.

The second patient was a man of over 50. An erysipela-tous eruption of the right leg disappeared under Apis, Iodium, and Kali iod. but when the patient returned to work he was at once attacked by paroxysms of dyspnea prevent-

ing him from lying down and causing great distress. Traces of albumen were found in the urine. Rhus and Lachasis did little. Botulinum 50—two doses, with an interval of two days, caused amelioration; after two days more, Botul. 30, one dose. The next day the albumen had disappeared. One more dose after four days was all that was required, and the patient returned to work restored fully to health. Dr. Schepens' last case is that of a lady of 50, with tubercular family history, a sufferer from neuralgias and minor nerve troubles. Dr. Schepens was called to her one night, and found her anxious and labouring for breath, somewhat cyanosed, with a dry cough and weak and irregular pulse. No fever, a few moist sounds at the lung cases, a good deal of flatulence, and symptoms relieved by belching. Causticum 12 and 6 relieved a little. Cactus 6 and 3 carried relief further, but dyspnea on the least exertion confined her still to bed. Finally Botul. 50 was administered, and then Botul. 30 at infrequent intervals. There was a rapid improvement after the first two doses, then after three days without medicine a slight set-back, Great relief followed four doses more of Bot. 30, given during eight days, and by this time the patient was up and doing her ordinary duties, but with a tendency to slight paroxysms of dyspnoea on exertion. After a dose of Tuberc. 100, Botul 20 was given. All tendency to dyspnoea now disappeared, but for a day or two there was great sensation of weakness in all the limbs.

There is little comment to add to Dr. Schepens' brilliant applications of the therapeutic possibilities of this poison. It is obviously a remedy of power, and there should soon be a number of cures to set to its credit that may define its sphere of usefulness, and give it a permanent position in the materia medica.—*Homeopathic World*.

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সাধারণের সুবিধার জন্য আমরা বিলাত ও আমেরিকার প্রসিদ্ধ হোমিওপ্যাথিক ঔষধাদি ও
জানাবিধ চিকিৎসাপযোগী জব্য আনয়ন করাইয়া সর্বদা উচিত মূল্যে বিক্রয় করিয়া
যাছি। প্রসিদ্ধ ডাক্তার ত্রীযুক্ত জে, কে, মৈত্রের নিজ তত্ত্বাবধানে আমাদের
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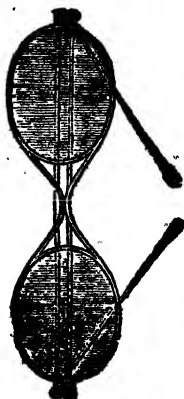
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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

ol. XVII.] AUGUST 15, 1908.

[No. 8.

HIGH POTENCY IN TYPHOID FEVER.

In our younger days of practice we had an idea that Typhoid fever, cholera and other acute and serious diseases cannot be managed by the administration of higher potencies of homeopathic medicines ; only in chronic and trivial cases of illness that higher potency is suited. There is certainly no foundation in practice for this assertion as it has been demonstrated by our experience in later period.

Depending upon this idea in our mind in former days we used to give Baptisia in the mother tincture or first decimal dilution, Gelsemium in the third or sixth, and Bryonia and Rhus in the same way. Then again we used to give them in frequent repetitions. We do not mean to say that we could not cure such cases in former days, but we did it at a great cost ; we mean to say after a loss of much valuable time and a good deal of efforts. In recent years we give these remedies in higher potencies and less frequently. The action is prompt and permanent.

A young robust girl had an attack of Typhoid fever in July 1899. She was under the treatment of a reputed homeopathic physician and attended to regularly. The disease went on increasing in virulence. We were consulted and we got the information that Bryonia, Baptisia and others had been given in lower potencies and frequently repeated.

At last profound delirium and profuse hemorrhage of dark grumous blood took place. The doctor gave her Lachesis in the 30th potency without much benefit. We found that Lachesis was the indicated remedy. One dose of Lachesis 200, made a profound impression upon the patient. The hemorrhage was stopped at once and the patient was convalescing.

In the case of a boy, thin, imaciated and blood-less, the prompt action of a higher potency was very well marked.

The patient got fever in the fall of 1901. He was treated by allopathic doctors and made worse. When we visited him he had high fever, the temperature ranging between 101 and 105F. and was very restless, tossing about in bed and though conscious had delirious talks and sleepiness. He had also frequent stools of horribly offensive smell and peasoup in color and consistency.

We gave him Baptisia 1x every four hours. Not much effect in two days. As soon as a dose of the 200th was given, improvement commenced at once and a good recovery was made.

An elderly gentleman had an attack of malarious fever with diarrhoea in January 1906. He was thin and anæmic-looking and subject to diarrhoea and dyspeptic symptoms. He was treated from the beginning by homeopathic remedies with partial effect. Subsequently the fever assumed a typhoid type and diarrhoea of bloody serum and of offensive

stuffs resulted. He had wandering delirium and comatose condition.

Baptisia 30 gave him some effect but 200 had a profound action. In fact the patient's condition was so much improved after the administration of this dose that we entertained a hope of his perfect recovery.

A medical student had a severe attack of Typhoid fever in August 1905. He was a robust young man of athletic habits.

From the commencement he was under the treatment of the best allopathic physicians—the professors of his college. Notwithstanding all their efforts the disease went on increasing. On the 24th day of his illness we were called. The temperature was between 103 and 105, great restlessness, delirium and somnolency, gurgling in the iliocecal region, diarrhoea and slight cough. When intestinal hemorrhage took place, the allopathic doctors declared the case to be hopeless and then we were called. When they heard that a homeopathic doctor took charge of the case, they said there was nothing in medical science that could save this patient.

He had great restlessness and delirium at night and tympanitic distension of abdomen. We gave him Lachesis 200, one dose, morning and evening. In two days' time the patient's condition was so much improved that his relatives entertained some hope of his recovery. After that we stopped the medicine, hemorrhage stopped and he was fast improving.

Later on his fever became of an intermittent character and a few doses of Apis set him right.

We can multiply the number of such cases now but that is not necessary. Sufficient it is to say that our confidence in the treatment of acute and dangerous cases with the high and highest potencies is thoroughly established. Our readers

will remember that in the pages of this journal we have shown the efficiency of higher potencies in cholera.

AN OVARIOTOMY AVERTED.

P. C. MAJUMDAR, M. D.

A young married lady, mother of three children, was brought down to Calcutta from Sylhet and located at Beliaghata. She suffered off and on from menstrual colic and became imaciated.

The last child was born four years ago ; since then she complained of colicky pain in the region of her right ovary and was always treated by allopathic doctors with relief.

When brought here, she was under the treatment of a best gynecological surgeon of the local Medical College. A relation of the patient was a student of that College. The surgeon told candidly to his pupil that nothing could be done unless the ovary is extirpated. This was a dread to the patient and her husband who placed her under my treatment.

Status Presens—Right ovary was enlarged about the size of a large ball painful on pressure. It was not very hard. Pains were aggravated by walking and movement. She was compelled to walk bent. Nature of the pain was stinging, burning. Menses, scanty and painful, appeared in regular times. During menstrual times pains were increased. They were also increased during new and full moon.

Urine was generally increased in time and quantity ; more so during menstrual period.

Slight feverishness in the evening, burning of the hands, feet and eyes. Very little thirst.

Appetite poor, taste for food was not perfect. There was constipation but sometimes acid feeling and heart-burn.

The medical student, the relative, asked me "what can you do to reduce the size of the ovary?" I assured him I would do my best.

Apis mel 6x morning and evening for four days.

I visited her again and saw her better. No medicine. Feverishness gone and appetite improved. Pain much less on pressure.

Placebo morning and evening.

Improving gradually when menses appeared and pains aggravated.

Apis Mel 30, one dose every morning till better. In a week's time I visited the patient. The medical student expressed his satisfaction and said the tumor was much reduced. The patient was cheerful and was gaining in strength and weight. In short she had been under my treatment for two months during which I gave her a few doses of Apis 30.

When she left Calcutta, she was hale and hearty, tumour entirely disappeared, menstruation restored to its normal quantity and colour. She was plump and healthy.

In this case the indications for Apis were so strong that nothing else could be suggested. The medical student was surprised at the action of the homeopathic medicine.

Notes.

Cancer and other malignant diseases are more prevalent now in India than formerly. Every right-thinking man should investigate the causes of this unusual rise of such cases. To our mind it seems that the allopathic doctors, their brutal mode of treating glandular affections and their frequent use of very powerful medicines in heroic doses account generally for the cause.

European mode of living, with its warm clothing and

copious meat diet have much to do in the production of these diseases. Whenever these allopathic physicians see a case of enlargement of gland in any locality, they commence treating it with various strong topical applications, with stimulating internal medicines and strong diet. The effect is that the growth cannot come out, it grows in and is apt to produce mischief in neighbouring parts.

We know all these from experience. A medical friend of ours has some abrasion in his tongue. He consulted us and we gave him some simple medicine but his allopathic friends advised him to apply strong nitric acid which produced great swelling and inflammation. He was using these things with stimulants and strong diet. The neighbouring glands were swollen, it was pronounced cancer of the tongue, operation was performed in England and after a few days declared hopeless. He returned and died an untimely death.

These case are not rare. So we advice all to desist from this unscientific and barbarous treatment.

What homeopathy can do in cases of illness which are considered either hopeless or out of the domains of medicine, may be gathered from the following correspondents of our friend Pundit Ramsahaya Pathuk of Simla fame. Punditji was an amateur homeopath when we visited him at Simla years ago. He had a great reputation there both among the Indian as well as European population of the city.

Punditji is a born physician. His father was a Bald and he induced his son to follow his profession. In younger days Paditji used to practise as an Ayurvedic physician for 18 years but was induced by a physician at Allahabad to try homeopathy. He commenced practising as a homeopath since 1887. We saw his extensive practice at Simla as a true homeopath.

We heard from him reports of very serious and obstinate cases.

There was a case of epilepsy cured by him. In this case all the symptoms were covered by *Solanum nigrum* and it made a beautiful cure.

Another case is important. We quote the symptoms and conditions of the patient as described by her husband.

"My dear Pandit shaheb. I have to consult on another matter. My wife was pregnant and the doctor had to cut the child inside the womb. The doctor said that her pelvic bones had become curved. She was again pregnant this year and the doctor wanted to make a premature delivery. Could you give us some medicine which may reduce the trouble of delivery or please advise what should be done."

Panditji sent him Kali Phos 3x to be taken three times a day, and sent *Cimicifuga* 3x if at the time there was any impediment to easy delivery.

Months after our doctor got a letter from the husband as follows :—

"My dear Pandit shaheb, I thank you very much for your favors. I got a son born on the 5th January without any instrumental help or much difficulty. What a glorious achievement homeopathy had made in this case."

Strontiana carb in a case of menstrual irregularity, Menses scanty, thin like washings, of fish, fishy smell, clots of blood at the end. It is early and of short duration.

NATRUM SULPHURICUM.

It is called by the Allopathic doctors as Glauber's salt, because it was discovered by a chemist named Glauber in the year 1658. It is a grand remedy and was proved in Homeopathic school by Trinks and others.

Hahnemann considered it as a great antisycotic remedy and Grauvogel described it as a great remedy for the hydrogenoid constitution. By hydrogenoid constitution he means that state of the body in which there is extreme sensitiveness to damp, wetting, bathing, watery foods and residence near water. This state is considered by our Kobirajes as slessa and we think Natrum sulph a very good remedy for excess of slessa.

Whatever it may be, it is a grand remedy and we must pay particular attention to the study of it. Lately we have had considerable experience with the efficacy of this remedy in various acute and chronic conditions of disease. Hahnemann states it an anti-sycotic remedy because in chronic state of gonorrhœa in its various manifestations Natrum sulph is an unique remedy.

Frequent urination with yellow sediment. Burning during and after micturition is a constant symptom. We have been able to cure cases of gonorrhœa in its first stage. When the discharge is white or yellowish white in character and burning urine. Headache of Natrum sulph is very peculiar. Head-ache at the base of the brain as if the bones were crushed. Head-ache with drowsiness and pyrosis. Various mental states as sadness, melancholy, timidity &c are from injury in the head. Cheerfulness is only observed after a loose stool.

In eye troubles such as ophthalmia, granular lids and others, it is a very useful remedy. Sensitiveness to light is a prominent symptom and about this Dr. H. C. Allen says

that with the possible exception of Graphites no remedy has such "terrible sensitiveness to light."

Its curative sphere in various ailments of the digestive tracts is unique. The following symptom picture from Hering's Guiding Symptoms is worthy of study. Loss of appetite, great thirst, with malarial symptoms. Vegetables, fruit, pastry, cold food or drink and farinaceous food cause diarrhœa.

Constant rising or gulping up of sour water ; heart-burn,

Constant nausea, vomiting of bile or sour mucus.

Stomach feels distended and heavy.

Liver swollen and sore to the touch ; cannot bear tight clothing. Bellyache in the morning before breakfast. Abdominal flatulency ; much rumbling and rolling, incarcerated especially in the right side.

Bilious colic ; excruciating pains ; vomiting of bile ; bitter taste ; tympanitis in bilious fever ; morning diarrhœa on rising ; sudden urging, gushing, accompanied with flatulence ; stools spatter all over the vessel ; prostration.

Stools—dark bilious or green bile ; yellowish green ; gushing ; scanty, slimy, light red or bloody.

Before stools contracting pain in abdomen and rumbling.

During stool : slight tenesmus and burning in anus, profuse emission of flatus.

After stool : cheerfulness and happy mood ; relief of colic.

So from these symptoms only readers will be able to use this remedy in cases of diarrhœa and dysentery. We have been so fortunate with this medicine in such cases that we consider it a valuable remedy for bowel complaints when indicated.

Numbers of patients often suffer from flatulent dyspepsia

with loose evacuation and they find *Natrum sulph* as their specific remedy.

It has also been used in cases of constipation as well with the following indications.

Hard knotty stools ; streaked with blood, accompanied or preceded by smarting in anus.

Constant uneasiness in bowels and urging to stool.

Natrum sulph is sometimes useful in diabetes. In a case cited in the Guiding Symptoms we have seen diabetes after a chill and an attack of rheumatic fever brought on by getting wet year previous.

Polyuria simplex ; excessive secretion of urine, especially if diabetic.

Burning during and after urination or with pain in the small of the back on retaining urine.

Gravel, sandy deposit in urine.

Natrum sulph like all other *Natrums* is a good remedy for intermittent and remittent fevers of malarious types. We have frequently used it in very bad cases with good effect. *Natrum mur.* is useful in the morning type of fever and in constipated cases, but *Natrum sulph* in diarrhoea cases and evening aggravation. We have chills with icy coldness without thirst, followed by violent fever and sweat without thirst ; attacks come on suddenly. Ague with bilious vomiting brought on or always made worse by damp weather or moist atmosphere at seashore.

Remittent bilious fever, or yellow fever assuming this form ; greenish yellow vomit, brown or black.

Natrum sulph has specific actions on the nails.

Paronychia ; patient pale and feeble in the morning, heavy feeling in the head, loss of appetite, in the evening chills and heat ; after a blister, filled with water which came on the last phalanx, swollen all around, very red and painful with matter

around the root of the nail ; pain more bearable outdoors than in the room ; damp walls. Panaritum, pain more bearable out of doors. Inflammation and suppuration around the roots of the nails.

Grauvogl used it successfully in cases of chronic fistulous abscesses. We have some experience in this direction.

Fistulous abscesses discharging watery pus surrounded by a broad, bluish line, burrowing. Eczema moist, oozing profusely.

Liver is particularly affected by this medicine.

Liver is swollen and sore to touch. Stitches in region of liver.

When taking a deep breath, sharp violent stitch in the right side of abdomen, as if in liver. Biliousness, excess of bile, vomiting of bitter fluid, greenish brown. Jaundice arising from vexation. Irritable liver sometimes after excessive study or mental work. It is a great remedy for the sycotic constitution.

It has been found useful also in various conditions and diseases—asthma, condylomata, traumatic epilepsy, epistaxis, hydræmia, influenza, leucæmia, malaria, migraine, ophthalmia, phlegmatia alba-dolens, photophobia, phthisis, sciatica, spleen affections, sycosis and warts.

Grauvogl used Natrum sulph in lower triturations ; but Dr. Clarke very aptly remarks "homeopaths need not confine themselves to any. When the correspondence is exact the highest attenuations will act better than the lower ; when the likeness is more general the lower will give the better result."

RHUS RADICANS.

A CASE.

It is a very important remedy in cases of intermittent fever. I had recently a case in which its curative power in fever is verified.

A young man of 24, went out shooting one day in July last. Came home quite fatigued. Had himself bathed and washed and took his usual meals. Heat was intense at the time and he had a mid-day sleep under an electric fan.

He had his usual dinner and slept in the same way at night. Next morning there was pain over his whole body, great malaise and restlessness. Feverish heat and excited pulse.

Took his morning meal as usual and at about 9 o'clock A. M. had severe chill, thirst, restlessness, pain over the whole body. About an hour after great heat, considerable thirst and restlessness, headache and tendency to vomiting. I gave him Aconite 3x every 4 hours and after taking four doses the fever stopped with copious perspiration but pain in the body and general uneasiness remained. No more medicine,

Next morning he was better ; so no medicine was given. At about nine o'clock A. M. he had severe chill, extremities cold and fever with great thirst.

Rhustox 30 three doses and the fever gradually subsided. There was scarcely any pain in the body but slight headache. At about four P. M. fever left him with slight perspiration. No more medicine. Fever again came on as usual at 9 A. M. next morning with the symptoms unchanged.

Rhus Radicans 3x three doses after the fever subsided.

There was no more chills and fever and the patient got well.

P. C. M.

SYPHILIS.

A robust youngman P. N., aged 25 years, had syphilitic sores on the glans. He came to me at once for treatment. Without much enquiry I gave him a few doses of Merc sol. 6, morning and evening. The sore was clean and healthy-looking but there were signs of eruptions coming over his body.

He complained of much pain in the limbs and in the groins. There was no bubo noticed.

Merc. iod. 30, one dose morning and evening. Sore was healing up but the eruptions were increased and bubo raised up with full force.

Cinabaris 30, one dose morning and evening. No improvement.

Medicines stopped for a week ; no better result.

Cinabaris 200, one dose, followed by Sac lac. powders once a day.

The eruptions were fading and rheumatic pains subsided and the buboes were also declining.

Placebo as usual.

After the new moon, rheumatic complaints were increased and pain in the throat on swallowing. Belladonna 30, morning and evening, had no effect.

Syphilinum 200 one dose dry on the tongue. Improvement was marvellous. Throat symptoms, eruptions were all disappearing and even bubo gone altogether.

I treated the case for three months when he was convalescing. After another three months he made a perfect recovery.

Occasional doses of syphilinum was often required. Strange it is after three doses of the 200 it had lost its effect and I had to resort to the c. m. potency which gave a permanent cure.

In passing I must remark that it was a true, hard Hunterian chancre.

CARBUNCLE.

We have got quite a large number of carbuncle cases this season, and we have treated and most of them very successfully. It is not out of place to say something about this disease and its therapeutic resources. It is regarded by many as a surgical disease, yet we are bold to say that this pathological process can be well managed by internal treatment in such a beautiful way that all surgical interference is unnecessary.

Carbuncle or anthrax is regarded by many as a cutaneous disease, but we think it rather a blood disease and should be treated by constitutional means. There is generally in this disease a tendency to putrefaction and blood change.

About the causes of carbuncle we are in the dark. It is generally found in psoric persons or those who suffer from diabetes or Bright's disease. Persons in advanced age are often the victims of this disease but the young people are not free from it.

It begins generally as a small boil or furuncle which spreads gradually and assumes a big size. There is a marked red areola around this boil or spot. It is very painful at first with swelling of the surrounding tissue. This areola becomes dark red or bluish in color and hard. This hardness by time grows softer and pus is formed. Then a thick mass

of decomposed tissue is formed which gradually shreds out and healthy granulating surface appears.

Carbuncle is always attended with more or less fever. In favorable cases temperature gradually lowers down and tissues bear a healthy appearance. When pus is absorbed in the system, it assumes an adynamic type and cerebral symptoms are developed which in most cases end fatally. Recovery takes place slowly.

Treatment : physicians of both schools, the majority of them we say, are decidedly against the knife. There was an idea prevalent from a long time that as soon as the tension of the carbuncle is removed by free incision, the healthy process takes place. This is proved by experience to be utterly untenable. Older homeopaths one and all spoke against operation, and advised to rely upon medicinal help. Dr. Rave, the veteran homeopathic physician, commences to speak of the treatment of carbuncle by the word "*No Knife*."

Dr. Baehr says "We don't advice lancing, because the pains and the suppuration generally last much longer in such a case, whereas if the boil breaks spontaneously, it generally heals in a few days ; however we should see to the removal of the core at as early a period as possible, for the presence of core keeps up the suppuration.

We have made use of very few remedies in the successful treatment of carbuncle. Arsenic, Anthracine, Merc. sol, Lachesis, Nitric acid, Secale, Belladonna, Hepar sulph., Carbo veg., Rhustox, Silicea and Sulphur.

Arsenic has great burning, restlessness, fever and general weakness, Symptoms are worse after midnights and pains are relieved by warm applications.

If there is no relief from Arsenic and symptoms are almost the same, Anthracine may be resorted to. In cases of central symptoms from absorption of pus in the blood

and gangrenous destruction of the parts it is of immense value. Great burning like fire, drowsiness and delirious talks.

When the parts wear a bluish or blackish appearance with symptoms of blood poisoning, Lachesis is of great service.

Rhustox—High fever, dusky redness of the parts, great restlessness, and violent pain and swelling—all point to Rhus as their redeeming remedy. When pus is formed, Hepar and Mercurius are of benefit. Symptomatic indications are almost the same in these cases. In a case where there is alarming hemorrhage from carbuncle, Nitric acid is the remedy. Very recently we have been able to save an old man from hemorrhage in carbuncle by this remedy alone.

Silicea is a remedy which is required for finishing the case. When the sore is tardy in healing, it is of great service. Excess of pus may be often arrested by this remedy. We have had a case a few days ago where suppuration is so excessive that we entertained a great fear from exhaustion. Silicea high did wonders there.

Dr. Salzer recommends Apis in cases of carbuncle.

Tarentula cubensis has been recommended by many American homeopathic physicians and the late Dr. Hughes of Brighton vouched for the efficacy of it. We made use of it occasionally and with good result.

Sulphur has the unique action of checking the recurrence of the disease.

Higher potencies act better in our hands in this disease.

MALARIA.

In their final report upon Jessore, Nadia and Murshidabad, the most malarious tracts of Bengal, Captain Stewart and Lieutenant Proctor—not the Drainage Committee as the Government Resolution incorrectly states—go the length of asserting that “the main cause of malaria and the condition most urgently requiring attention is the village sanitation.” They further indicate plainly that in their opinion, which is based upon a personal investigation of existing facts in a number of villages, large schemes for the drainage of bheels and the opening up of the heads of dead rivers were not likely to produce much benefit, in so far as prevalence of malaria is concerned. And the reason is simple. “Each village,” they say, “has innumerable breeding grounds for mosquitoes, close to the houses, most of which would not be touched by these projects for improving the surroundings of the villages.” Obviously then, the proper method of grappling with the problem of malaria is to deal with village sanitation. Is this a hopeless task? There can be no doubt that the present situation almost compels despair. Here is the graphic picture which the investigators give of a typical hamlet :—“The whole village is embedded in a dense tangled mass of jungle and bamboo thickets, and through this run narrow paths winding in every direction. Beneath the thick under-growth round each house lie countless numbers of pits from which earth for the plinths has been dug; during the rains and for long afterwards these are stagnant foetid pools full of rotting leaves and vegetable matter. No sun reaches them, so evaporation is slow, and they remain for months convenient places in which the female mosquito, heavy with her latest feed of blood in the neighbouring house, can lay her eggs, and swarms of larvæ find ideal surroundings for their growth. The adult mosquito, too, finds shelter during the day from sun and breeze in the shade of the jungle round the houses. To the inhabitants the jungle affords privacy for their households and probably some protection from cold breezes

in the winter, but it is also a convenient latrine and the stench in some of the villages is overpowering. The drinking-water supply is generally extremely bad." The marvel in such circumstances is not that the villagers suffer from malaria and other diseases, but that any children survive and that whole villages are not depopulated by virulent epidemics. But is this the only conclusion to be drawn from the facts? Are we to sit with folded hands and say that until the people cure themselves of their "ignorance" and "apathy" they must be content to lead miserable fever-stricken lives and to die of malaria? This apparently is the attitude taken up by Government. "The insanitary condition of the village sites," we are told, "has been frequently noticed in the past, and there is little new that can be said on the subject." And again: "The sanitary improvement of the village sites can only be carried out by the people themselves, and until the villagers are educated up to a point at which they can understand commonsense sanitary precautions, little progress can be hoped for." With this policy of pessimistic inaction—we had almost said of helpless indifference—we have no sympathy. For one thing we do not believe that the Bengal villager has any monopoly of apathy or ignorance. Not many decades have passed since the average British householder might have been described as both ignorant and apathetic, and to this day most large towns in England contain thousands of men and women who live in daily defiance of the laws of sanitation. But the ignorance or stupidity of the people has never been regarded by British reformers as a reason for allowing them to suffer the consequences of their neglect. On the contrary, the want of education and of ability or inclination to help themselves has been regarded a powerful argument in favour of external assistance. Sanitary laws have been laid down, and a sanitary organisation provided; and, though sanitary knowledge has been at the same time widely disseminated, it may be said that the sanitation of Great Britain has been carried out for the people, rather than by them. We have no right to expect more from the Bengal peasantry than from British townfolk and villagers. Hence, if the people of Bengal show no disposition to cope

with the insanitary conditions in which they live it is unquestionably the duty of the Government to take the business of reform in hand. Captain Stewart and Lieutenant Proctor offer two valuable suggestions for this purpose. "It is not to be expected," they say, "that the villages of Bengal can all be turned into model villages immediately, but much can be done gradually, especially if the co-operation of the zemindars can be obtained. A few villages, here and there, as object-lessons, would form useful experiments as to the value of the measures taken, and if successful, would go far to obtain that co-operation." We believe this advice to be sound and practical. A village where, with the assistance of the zemindar, the jungle had been cut and foetid pools filled up would, if the health of the people showed an improvement, become a model for surrounding villages. The other suggestion, which is that the value of sanitation should be taught in all schools, would also in time help to educate public opinion. The Drainage Committee are disposed to think, that the creation of local sanitary authorities is one of the measures needed to provide a remedy, but they apparently doubt whether such a step is practicable in the present state of public opinion. All this points to the desirability of establishing a really effective system of local self-government, and of organising a scheme of utilitarian education which will teach the people how to live.—*The Statesman*.

Clinical Cases.

P. C. MAJUMDAR, M. D.

I.

Babu Netye Charan Bisai, aged 28, thin and anemic, and of sanguine temperament, had an attack of colic after having indulged himself in highly-seasoned food on the night of the 14th January 1907. He suffered a good deal during the night and in the morning came to me.

Pain excruciating, of digging and pinching character, from pit of the stomach to the naval region. Frequent attempt at stool but nothing came. Abdomen slightly distended could not bear pressure. Pains came on in paroxysm and during the height of pain he became irritable and scolded his servants and attendants. He took some aerated water and some allopathic mixture without the slightest relief.

Nux vom 200 one dose and four placebo powders every 3 hours relieved him at once. He was all right next day and took his usual meals.

II.

Pandit M's son, aged about 24, strong and firm had frequent attacks of ophthalmia and cured by allopathic applications. He was subject to cold and catarrh very much, especially during the advent of winter.

His father brought him to me on the 24th December 1906.

The eyelids were slightly swollen. There were sticky thin and excoriating discharge from the orbital conjunctiva which were highly red and swollen. There were innumerable granules in the upper and lower margins of the lids.

Cold and catarrh of the nose, frequent sneezing and running of watery fluid from the nose. Could not bear light well and always itching sensation in the eyes.

The patient came to Calcutta during the holidays and could not stop here longer. I gave him Arsenic 30, one phial of pills and Calc 30, one of globules. The direction was to take one pill of Arsenic morning and evening for one week and then to stop the medicine for one week and then to take the pills the same length of time but once a day. About the globules they should be taken later on when advised.

In a month's time the father wrote me to say that his son improved a good deal, in fact his complaints were all gone and he could use his eyes for reading.

I wrote him to stop all medicine and for the tendency to catarrh the patient was to take four globules once in a week. He took it for three months and was cured of it. His father came to report that his son did not suffer from cold as he used to be before taking my medicines.

By this cure the Pandit became a believer of the efficacy of homeopathic medicines. He is a very learned gentleman holding high position.

III.

Mrs. N., an elderly lady of anemic appearance, had been suffering from dyspepsia and acidity from a long time. She used to get a severe attack of diarrhœa and heart-burn almost every month.

She presented to me the following symptoms. Gone feeling in the stomach, voracious appetite. Some eructation after eating, great desire for chillies and sour things. Heaviness in the stomach after eating. Sometimes vomiting of acid things.

Diarrhœa, yellowish green stools very thin, sense of insecurity in rectum, in passing wind she soiled the cloth. Yellow stools with much rumbling in the abdomen.

Colic before and during stools. Wind passed. Menses copious and painful, generally three, four days early. During menses headache and feverish sensation.

Became very weak as she could not take her food very well as it turned acid and loose stools.

Sepia 30 morning and evening for six days. Not much improvement. On the contrary acidity and diarrhœa increased.

Placebo one powder twice daily.

Diarrhœa continued, troubled with much acidity and heart-burn especially after breakfast.

I visited her at her place and found profound anemic appearance and weakness of heart ; there was anemic bruit heard at the apex.

Natrum Phos 30 morning and evening. Improvement noticeable at once. Appetite improved and acidity disappeared after a week and diarrhœa stopped.

I gave her occasional doses of the medicine. She made a perfect recovery.

THE REMOVAL OF THE MIASMS—THE ONLY WAY TO CURE ABNORMAL GROWTHS.

J. H. ALLEN, M. D., LOGANSPOST, INDIANA.

Shakespeare said to a physician in one of his plays—

Remove the cause of this effect, or rather, the cause of this defect ; for this effect, defective comes by cause !

All tumors and abnormal growths may be classified as chronic diseases, and are but manifestations of some chronic miasm. They are a miasmatic stases, as it were ; a process of correlation, brought about by the life forces in their efforts to confine the actions of these miasms in the organism, which might otherwise destroy it.

The power of the organism to eliminate these poisons is necessarily limited ; therefore Nature adopts the next best, and probably the only method by which the destructive process going on the organism is for a time held in abeyance by a stasis of the disease. Very often, this so-called stasis is induced by improper treatment of the case : such as strong drugs administered internally, or locally applied or by any unhomeopathic means.

The life forces usually handle this morbid forces with wonderful

judgment, if left to themselves, but if by any local or mechanical means we arrest their efforts the tide is usually turned against us, and the destructive process that is inherent in the miasm is accelerated, and death is often the final outcome in the case. Frequently, however, Nature makes another violent effort to save the life of the victim by this correlating process in the form of a tumor, hypertrophy, enlargement of a gland, abscesses, chronic ulcerations etc. In fact, we may expect anything to come out of a suppression of these miasms.

Organon, paragraph 28: "The true natural chronic diseases are those which are produced by a chronic miasm."

If Hahnemann was right; and I doubt if there is one among you who thinks otherwise, then all abnormal growths being chronic in their nature depend on some one or more of these miasms as a basis; and in our treatment of these cases, whether benign or malignant, we will, after investigating each case closely, find the cause that underlies each one to be of miasmatic nature.

Therefore, our treatment must necessarily depend on their removal or, in other words, it must be antimiasmatic. That is our prescriptions must be based on the miasmatic symptoms, to a great extent; and our success will depend very much on our ability to detect their presence in the organism and to apply the true similitum that is to remove them.

Organon, paragraph 29; "Every disease not belonging exclusively to surgery express itself by symptoms that are caused by a dynamic change in the vital powers," and, in brief, are cured by the application of similia. If some morbid agent is at work in the organism, manufacturing tumors or abnormal growths, as the case may be, is it not wise to strike at the fountain head?

"He is a preserver of health who knows the cause and removes it," and until you find the cause you cannot remove it. I think I hear you say, "Shall not the totality of the symptoms be our guide?" Most certainly, if you can find the totality; but if you do not look beyond what appears on the surface you cannot find this totality. You must look beyond what would naturally arise

from any reflex or local disturbance caused by the presence of the foreign growth. Frequently when we have removed one of the miasms another makes its appearance, which had been held in check by the more active one. In this case we must continue our treatment until it is eradicated, and so on until a cure is perfected.

There are other conditions that may hinder the progress of a cure and prevent us from removing these miasms, such as suppression by local means or by the internal administration of crude drugs (artificial diseases). I will illustrate this with a case.

Mrs. B., aged sixty, had a cancer removed from her left mammary gland two years ago, axillary glands and all. Two years later it had again grown to that of a medium-sized orange and of stony hardness; color, very dark, almost black in the lower portion. She had pricked this portion a number of times with a needle, it emitting an inky-colored fluid, which was offensive. There was more or less shooting pains extending to axilla. The symptoms of the case pointed to Iodine; which was given but with no benefit. This was followed with Lachesis with no better result. On carefully taking her case again I found her troubled with deafness and noises in ears, with full feeling in head. China Sulph. was next prescribed, which cured the head symptoms, but the breast symptoms increased, especially the enlargement and discoloration but suddenly after the removal of the artificial disease a sycotic eruption appeared accompanied with an acrid vaginal discharge, that led me to give Medorrhinum, which reduced the growth fully one half when it came to a standstill. Then the symptoms again pointed to Iodine, which completed the cure. Here was an interlocking, as it were, of a suppressed miasm in the acute form upon a psoric basis in combination with sycosis; a very formidable combination and fruitful of any stases or structural change even to a malignancy. Here we come face to face again with this developing process, that I brought forward so prominently in my paper in clinical medicine at our last meeting. The fact is you cannot make a cure by any other method unless by accident you stumble upon the similimum.

Again, we have hereditary conditions in which we cannot trace the cause to any special miasm. Here with Tuberculum in a very high potency, based upon the symptoms given by Burnett, I not only stopped the growth of a large interstitial fibroid of the uterus, but it is slowly disappearing. This case has been examined by some of the best surgeons of our school ; among them Dr. Carlton of New York considered it incurable. Two years ago the patient was confined to her bed a good deal of the time. Now she looks after all her household cares unassisted. The growth followed the suppression of a leucorrhœa by medicated injections, the nature of which could not be ascertained.

Another case of interest is a case of ague suppressed by quinine—a married lady, aged thirty six, who was very markedly psoric. One child was born previous to the suppression of the malaria. Since that time she has never been pregnant.

Soon after the suppression the menses became painful, profuse, dark and clotted and a cystic tumor made its appearance in the left ovary. The case came to me last February, or about twelve years after she first noticed the growth.

I found her suffering with pains in hips, back, and also in the region of the tumor ; often so severe as to prevent sleep night after night. The growth then probably weighed twentyfive pounds. The remedies used in this case so far have been China Sulph., Lach., Sulph., Lycopodium. She is now free from suffering and the growth is reduced to eight pounds or less, and I have hope of curing the case. In this case we have a suppression of an acute miasm upon a psoric basis, and a stasis as the result. *

To show you that removal of the stases or growth does not cure the patient or remove the miasm, I will recall another case.

Mrs. K., aged forty ; large and fleshy ; has an ovarian cyst that was so large that I advised an operation. She acted on my advice and had it removed. The tumor and its contents weighed sixty pounds. Recovery followed promptly and I did not see her again for two years, when she returned, suffering from peripneumonia covering

almost the entire body. Since the removal of the growth she had been a sufferer with rheumatism and a tendency to dropsy. The lower part of her body and lower limbs were quite œdematous. Previous to the removal of the tumor she had suffered with erysipelas ; since the removal, peripura and dropsy. Before the operation this patient seemed perfectly well, and did not suffer save from the mechanical effects of the growth. Now she says she had never seen a well day since its removal. I could have written a small book on her symptomatology. I, however, traced the growth to a suppression of an itch, with Cinnabaris locally applied. Her remedies have been Lach, Cinnabaris, Psor. She is now well after three months' treatment. I did not treat the case previous to the removal of the growth.

Again, we have growths that seem of very little importance and not much annoyance to the patient until after the suppression of an acute miasm, which suddenly they blaze up with all the virulency of malignancy, while had the acute disease been properly treated, nothing might have come out of it.

Case :—Mrs. A., aged thirty-eight, light blonde, fleshy ; has had an epithelial spot on right cheek.

Diagnosis verified by a number of physicians, with advice in each case to leave it severely alone. She has had it for a number of years, and has noticed very little annoyance from it, save an itching occasionally ; but last winter she had a severe attack of la grippe, during which she was given large and repeated doses of quinine, and soon after the la grippe symptoms subsided it began to grow rapidly, and from a small spot the size of pea it had increased to the size of a half-dollar. It was inflamed and angry-looking, and accompanied more or less with a burning and stinging pain. As her most prominent symptoms pointed to China Sulph, it was given in very high potency with good effect. In two weeks it was followed by Sulphur, c. m. when the growth returned to almost its former condition previous to la grippe. Erysipelas of the face then made its appearance and old trouble that had been suppressed a number of times. This was cured by Rhus tox. Following

this, about a month later, came a crop of corns that had in previous years almost plagued her life out, and which had gone through usual routine treatment of local abominations, scalpel^{ing} ad limitum. This was accompanied with a profuse and very offensive foot sweat, which, too, had been suppressed by local means. This very formidable combination was met with and cured by *Silicea*, c. m. (Fincke).

I have selected these cases as some of the types we generally meet. They are the ones that are so apt to puzzle and confuse us, but our success will depend on how we arrange the different phenomena as they present themselves in each turn of the case. If we are familiar with the law, we are more apt to understand this numerous and varying sets of symptoms, which are but the strong efforts of the life forces to untie this tangled skein. In due time I hope to be able to present more of these types that I have succeeded in unraveling.

A great many of these cases we cannot successfully treat, principally because we do not get the right impression, or, rather, the right expression of the case. Again, we frequently get impatient ourselves and try to hurry matters, or the patient becomes impatient and we are limited as to time for the proper development of the case. I am fully convinced in my own mind that if this course is carefully carried out encouraging the patient to stick to the treatment, and by selecting with care and good judgment the remedy indicated in each change in the case, that the use of the knife will in the future drop to the minimum.—*Medical Advance*

THERAPEUTIC NOTES.

Pernicious anæmia :—It is a very dangerous disease.

Arsenic is considered as one of the best remedies in such cases. The pathological and symptomatic indications of Arsenic in this disease are very marked. Arsenic causes fatty degeneration of heart and the reduction of red blood cells.

Many authors recommend big doses and frequent repetition. But we do not find it necessary. On the contrary as the reactive power of nature is at abeyance in these cases, so higher potencies with occasional doses are all required. But the remedy must be continued for a length of time.

Chininum Ars. is another remedy that often gives us excellent results, especially in cases where malaria and loss of blood are the cause of such conditions.

Picric acid is also to be considered in cases where there is excessive mental and bodily labor, without much recreation or rest ; and where excessive indulgence in sexual functions is the cause of the disease.

China may be considered in this connection. It is caused by the loss of vital fluids and long suffering from malarious fevers.

Phosphor, Sulphur, Zincum Phosphoric, Argentum nitric and such antipsoric and blood-making medicines are of much value.

Diet should be nourishing, and at the same time easy of digestion. Open air exercise and rest are best adjuvants.

Goiter :—It is a condition of the system where homeopathic remedies are of great value. We have been able to cure many cases. It is often found in psoric constitution and it is strange that our allopathic brethren claim to cure it with operation procedure.

Iodine is one of the best remedies in such cases. The action of Iodine in glandular structures, emaciation and deterioration of blood is well marked. Symptomatic indications are also unique. Consult Materia Medica.

Merc. Iod and Baryta Ioda are also very effective remedies. The selection depends upon constitutional symptoms.

Calc. carb. and Iodata are often used with benefit. Goiter

hard and firm, acidity and loss of flesh and other constitutional symptoms of these remedies should be considered.

Calc. Fluor is also used with success, where the goiter is very hard and painful and where it shows a tendency to calcification.

Sulphur and Silicea may be recommended as intercurrent remedies and on constitutional basis.

Many authors recommend electricity as the means for radical cure of goiter but we have grave doubts about its efficacy.

Torticollis or stiff neck :—It is a very obstinate and painful disease.

Belladonna is useful when sternocleido mastoid muscles of right side are contracted ; no inflammation or pain.

Bryonia :—Stitching pain worse by slightest movements, loss of appetite, thirst and constipation.

Lachnanthes :—The neck drawn on one side. Stiff neck.

Nux vom :—Disease from fright and after abuse of food and excess of medicines. Head drawn to the left side.

Coccycodynia :—It signifies pain in coccyx and coccygial region (muscular and tendinous parts attached to the coccyx). It may be of a neuralgic or inflammatory or rheumatic nature (Raw).

Cal. Ph. :—In injuries with crepitation.

Fluoric acid :—Periodical aching (Hering).

Lachesis :—Worse after sleep. After a fall on the ice.

Mezerium :—After a fall resulting in periostitis of coccyx.

Cicuta :—During first appearance of catamania after confinement.

Tarentula :—After confinement, burning, smarting and painful uneasiness in the coccyx, better when standing, worse from slightest motion or pressure.

Belladonna, Causticum, Thuja, Phosphorus, Lincum and others may be required.

Retention of urine :—It may be the consequence of spasm or paralysis of parts.

Aconite :—From cold and injury, urine passes only in drops with great pain.

Apis :—After retrocession of eruption. Burning, stinging pain, abdomen tender to touch.

Arnica :—After a fall.

Belladonna :—Stitching pain. It is followed well by **Hepar** if it only relieves but not cures (**Hering**).

Camphor :—After measles and excessive use of **cantharides** blister.

Cantharis :—Inflamed and bloody urine.

Sepia :—Retention and suppression after fever.

Book-Review.

A Text-Book of Clinical Medicine : Treatment.

BY CLARENCE BARTLETT, M. D.,

*Professor of Medical Diagnosis and Clinical medicine
in the Hahnemann Medical College of Philadelphia ;
Visiting physician to the Hahnemann Hospital ; Philadelphia :*
Boericke and Tafel.

This big volume of Dr. Bartlett is devoted entirely to the treatment of diseases. Besides homeopathic treatment of diseased conditions, the author has very judiciously given us various non-medicinal adjuvants, diatetic and hygienic. But his reference to some medicinal agents largely availed of by the allopathic doctors is not a happy one, as they are now discarded even by the allopaths themselves, as complete-

ly useless or of doubtful value. There is a belief among some homeopathic physicians that palliatives are often required in hopeless cases to give the patients temporary relief. It is therefore that they do not hesitate to give morphia and other narcotic substances. From our varied experience as allopaths we can say that even for the purpose of palliation these narcotics do more mischief and afford no relief to these poor incurables, on the contrary aggravate their suffering.

We know in these cases indicated homeopathic medicines can secure some palliation.

Though there are these dark points in his book of treatment, yet there are many things very valuable for the therapeutic stand-point. It is in fact an admirable book of reference for practitioners. We commend it for study and reference to our readers.

The got-up of the book is creditable to the Publishers. The paper, type and every thing neat and first class.

How to Take the Case and to Find the Similimum

BY

E. B. NASH, M. D.

Philadelphia. Boericke & Tafel.

This is an admirable little book by Dr. Nash. Every homeopath knows how nicely and with what exact accuracy the author has written his other works. It is of the same type. The proper way of finding out a similimum is by tracing the conditions of the patients in the following order :—(1) Location ; (2) sensation ; and (3) modalities—that is aggravation and amelioration. Causes of the diseased conditions are also noted down. These are numerous ; but Dr. Nash mentions the following :—Fright, exposure to

dampness in the air or dry cold air ; cold bathing ; suppression of an eruption ; a badly treated or suppressed gonorrhœa

Suppression of intermittent fever and various affections from syphilis. He wants us to take notice of the constitution and temperament of the patient. He also considers the symptoms according to their relative value as Generals and Particulars. He advises us to "take the case" in this way and then arrive at the similimum.

This little book is a jewel and it is indispensable for every homeopath. It should be studied and digested. Every homeopath is indebted to Dr. Nash for giving us such a valuable production.

A Treatise on Urological and Venereal Diseases.

BY BUCK G. CARLETON, M. D.,

With one hundred and seventy-one illustrations.

Philadelphia ; Boericke and Tafel.

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Every disease is fully treated and treatment given in full detail. It is a very valuable book on sexual diseases of various kinds. Special feature of the book is its exhaustive description of the disease and its neat diagrams.

We commend this book for study. More thorough indications of homeopathic remedies are all that we require. We believe the author in the next edition of this work will satisfy the homeopathic students and practitioners. It is a nicely printed volume and does credit to the Publishers.

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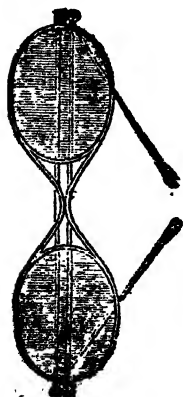
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হেড অফিস—১৩নং বনবিল্ডিং লেন, খেজুরাটী, কলিকাতা।

ব্রাঞ্চ—২৯ নং অপার চিৎপুর রোড, শোভাবাজার ;

১৬১২ নং বহুবাজার স্ট্রীট, শিয়ালদহ ;

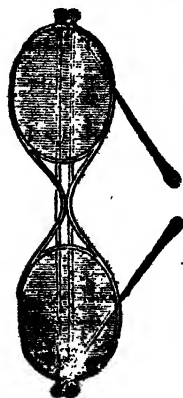
৩১ নং রসারোড, জগু বাবুর বাজার, ভবানীপুর।

হোমিওপ্যাথিক ঔষধ টিউব শিশিতে ড্রাম /৫, /১০ পর্যন্ত।

আমরা আমেরিকার বিখ্যাত “বোরিক এণ্ড টেকেল” কোম্পানীর ও জাপানীর বিখ্যাত ডাক্তার “উইলমার শোরবের” ঔষধালয় হইতে বিস্তৃত ঔষধ প্রচুর পরিমাণে আমদানী করিয়া অল্প লাভে সস্তা দরে বিক্রয় করিতেছি। আমাদের ঔষধালয় একজন সুযোগ্য ডাক্তারের তত্ত্বাবধানে ও শিক্ষিত কম্পাউণ্ডার দ্বারা পরিচালিত। আমাদের ঔষধালয়ে যে বিস্তৃত ঔষধ বিক্রয় হয়, ইহাতে আর সন্দেহ নাই। ইংরাজী পুস্তক, শিশি, কর্ক, সুগার, গ্লোবউল ইত্যাদি প্রচুর পরিমাণে বিক্রয়ার্থে প্রস্তুত আছে এবং বাজার অপেক্ষা সস্তা দরে পাইকারী ও খুচরা বিক্রয় হয়।

কলেরাচিকিৎসার বাক্স—পুস্তক, ক্যান্ডার, ড্রপার সহ ১২ শিশি ঔষধপূর্ণ বাক্স ২ টাকা, ২৪ শিশি ৩ টাকা, ৩০ শিশি ৩৮/০ আনা, ৪৮ শিশি ৫০ টাকা। মাণ্ডুল স্বতন্ত্র।

গৃহচিকিৎসার বাক্স—পুস্তক, ড্রপার সহ ১২ শিশি ঔষধপূর্ণ বাক্স ২ টাকা, ২৪ শিশি ৩ টাকা, ৩০ শিশি ৩৮/০ আনা, ৪৮ শিশি ৫০ টাকা, ৬০ শিশি ৬০ টাকা, ৭২ শিশি ৭০ টাকা, ১০৪ শিশি ১০৮ টাকা। মাণ্ডুল স্বতন্ত্র।



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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
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Vol. XVII.] SEPTEMBER 15, 1908. [No. 9.

TETANUS.

Tetanus is a disease so disastrous in its results and so painful and agonizing in its character that it behoves us to study the malady most carefully and record our experience with it for the benefit of our fellowmen.

It is a disease characterized by tonic spasms and is said to be caused by a bacillus that has been demonstrated by Rosenbach, Nicolaier and Kitasato. It is generally the result of some injury of some character. The gravest form of the disease is generally found among new born infants and is known as *Tetanus Neonatorum*.

Its principal symptom is a tonic spasm that generally affects a certain group of muscles, which gradually extends and affects the whole organism.

The spasms of tetanus are very much like those of strychnia poison. The prognosis is always grave, nearly eighty per cent succumbing to the effects of the disease.

Here is a case to the point—

A few days ago I was called to treat a patient suffering

from violent spasms. In taking the history of the case I found that the man has been severely beaten by another person when they were both much the worse for liquor. It seems that his adversary began to beat him and gave him blow after blow on the chest until blood came out of the mouth. This was about four days ago and now he began having severe tonic spasms beginning from the head down to the waist. These attacks were intermittent in character and during the height of the spasms he assumed a position of complete opisthotonus. At this time he became thoroughly stiff and screamed out in great agony. He was thoroughly conscious and could describe his symptoms very well but for the spasms. The urinary and the alimentary functions were very much perverted. He had great difficulty in swallowing ; he had no motions for three or four days and he passed water only once in twenty-four hours. He had no sleep on account of his spasms. I gave him *Arnica* 3 to be taken every three hours. At night I got the report that he was no better, in fact the spasms were little worse if anything.

Physostigma 6 every three hours during the night.

In the morning I got the report that the patient has passed a comparatively better night. I visited him about 9 A.M. and found him much better than on the previous occasion. Although he still had the spasms, they were not so severe in character. *Placebo* continued.

In the evening I got the report that he had violent spasms again and they were more long lasting and frequent. I gave the patient *Cicuta* 30, four doses to be given every 3 hours.

The next morning I got the report that he was practically all right. He had a fairly good sleep during the night and had no more spasms. *Placebo* continued. Two days

after I was greatly delighted to see my patient walk into my room—a man who could hardly turn round in his bed three days ago.

J. N. M.'

CHOLERA ASIATICA.

(*Continued from page 346, No. 11, Vol. XVI.*)

Calcareæ Arsenicum.

This remedy is seldom called for in the true cholera evacuations ; still there is one stage of the disease where it is invaluable. We have already mentioned about this before and here we shall try to incorporate some of the leading symptoms.

Great depression of mind, congestion in the head before an epileptic attack, head is hot in albuminuria, face swollen especially above the eyes. After belching, burning in œsophagus as from pepper with garlicky taste in the mouth when swallowing, acidity of stomach, gastric ulcer. May be useful in pancreatic diseases, with colic and looseness of bowels. Bowels very tense, albuminous stools with ascaridis, region of the kidney greatly sensitive to pressure, infantile diarrhoea. Must pass wind every hour. Urine contains mere albumen.

Albuminuria during pregnancy.

Loses voice and afterwards consciousness. Before an epileptic attack a kind of asthma waking soon after midnight. Heart beat very strong in albuminuria. Back of hands œdematous, collapse in heart and kidney affections, *embolism in albuminuria*. Fever in the afternoon with sensation as if the abdomen were puffed ; much thirst for cold water and afterwards loss of appetite in the evening. Bruised feeling in the chest, fatty degeneration of the heart due

to obesity. Heart and kidney diseases. Its antidotes are Carbo veg, Glonoin and Pulsatilla.

Dr. Clarke in his dictionary of *Materia Medica* gives us its characteristics:—Vertigo when moving the head, flying or swimming sensation as if the feet did not touch the ground ; Indescribably well, (in malignant diseases this is always a very grave symptom. I have frequently observed plague patients make this remark just before losing consciousness. They declare that they are all right and there is nothing the matter with them. In these cases we should know that the end is not very far off). Rush of blood to the head before an epileptic attack. Epilepsy with heart disease. The headache goes from before backwards. Violent pains in the right eye, delirium in the dark. Blue rings under eyes. Swelling of inguinal glands with tearing pains in the legs. General dropsical swellings with albuminuria. Burning and heat in chest, feeling as if he would suffocate with palpitations. Every fourth beat of pulse intermits with great regularity. According to P. C. Majumdar it is the most efficient remedy in the infantile enlarged liver and spleen of India. In albuminuria great sensitiveness of the kidney. Cholera with impeded respiration from heart embolism. It is suited to lymphatic, scrofulous and tuberculous persons ; fat women approaching the climaxis. It is a chilly medicine, the symptoms being worse in cold weather, when out of doors.

I have myself made use of this remedy in albuminuria, in cholera, in plague and in the enlarged liver and spleen of infants—a disease so common in Bengal but seldom heard of elsewhere.

I have already stated I learnt its use in the sudden failure of the heart's action from Salzer's excellent brochure on cholera.

Here is a case where Calcarea Arsenica did very good work.

A young man, aged 20, was attacked with cholera about the beginning of December. When I saw him, he was in the collapse condition, his pulse was imperceptible, he was very restless, tossing about the bed; complained of violent pains in the addomen, his stools were of the rice water consistency and being moved very frequently. He was an up-country lad, had come down to Calcutta for shopping purposes, had suffered privations in the way and had taken irregular meals of undigestible substances at all hours. He had been given chlorodine &c. previous to my visit.

Aconite 3x every hour for four hours. When we visited him again, the pulse was slightly perceptible, but he was slightly drowsy and complained of severe abdominal pains. Nux. Vom 200, one dose and no more medicine for four hours.

About 10 o'clock in the night I was informed that he was better in every way but seemed to be more drowsy. The pulse was perceptible but very weak. Placebo four powders every three hours during the night.

I visited him early in the morning, when I found a decided improvement in the patient. His pulse was much better, the restlessness was also gone but he still complained of the pains and felt very hungry. It was nearly 48 hours since the disease began, but as yet he passed no urine and complained of slight burning of the body. Sulphur 200, one dose. No more medicine during the day. At 2 o'clock I was informed that he had still passed no urine but was talking non-sense and was jumping out of bed. He was also slightly feverish. Bellad. 200, one dose.

About six o'clock I was informed that he had still passed no urine and was in the same state. Moreover he was becoming very restless. I gave him a dose of Acon. 200 and told the man not to administer the powder, should

he find the patient better on his return, for it has been my experience that the less medicine we administer during reaction, the better.

On his return he found that the patient had passed water but still he gave him the powder as he thought the patient was still very restless. This however made his condition worse.

Although he passed water freely and the stools became more consistent and natural, the pulse was worse and he was completely unconscious. Except groaning and moaning, he could not answer our questions and the pulse was very feeble and irregular.

Calc Ars 30 every two hours. I was informed after six hours that the pulse had improved but he was still unconscious and was getting drowsy. Moreover there was marked tympanitis as he was not moved since the morning.

Nux Mosch 30, one dose followed by Placebo.

The patient was decidedly better in the morning, and in the course of two days he was completely restored to health.

In my opinion the timely administration of *Calcaria arsenica* saved the patient from an imminent heart failure while *Nux Moschata* no doubt helped to clear the brain symptoms which was also equally essential.

(*I. H. R., Vol XIII, No. 12.*)

Calcaria Ostrearum.

I do not know whether *Calcaria* has ever been used in true cholera, but that it has been used with decided good results in cholera infantum and other loose evacuations of the bowel, is a well-known fact.

Diarrhoea during dentition. The *Calcaria* child is generally flabby and is very susceptible to cold. His head sweats a great deal. He has great longing for eggs; craves for

undigestible things (Alumina). Aversion to meat. Acidity of the digestive tract ; sour eructations, sour vomiting, sour stool, sour odor of the whole body (Hepar, Rheum.)

Pit of the stomach, swollen like an inverted saucer and painful to pressure.

Uremia and other diseases brought on by standing on cold damp pavements, or working while standing in cold water.

Stools—Green, whitish, large, watery, yellow, smelling like rotten eggs, sour, undigested containing curdled milk. Ascarides with the stool. Summer diarrhœa of children.

Debility.—Profuse sweat on the head when sleeping, especially in the back of the head, wetting the pillow. Knees clammy. Feet constantly cold and damp.

The selection of Calcareæ will frequently depend more upon the constitutional symptoms than the character of the stool and like indications.

Calcareæ Phosphorica.

Bell has very truly observed that Calc. Phos is one of our most valuable remedies for the diarrhœa of scrofulous and rachitic children. I have frequently used this drug for the debility and general prostration that so frequently follow an attack of cholera. Many a case that finally merges into tuberculosis is saved by the timely administration of the drug.

Like Calcareæ Ost., it is also a good remedy during dentition. Great imaciation, the child looks old and wrinkled. Skin dry and cold.

Stools—Green, slimy, undigested, spluttering, expelled forcibly. Very offensive.

I have made most extensive use of Calc. Phos. in cholera infantum when China and other remedies failed to effect a radical cure and a hydrocephaloid condition was impending.

"A young boy about 3 years old had an attack of cholera and in spite of our best efforts lingered for days and began getting from bad to worse every day. We tried Chamomilla, Ipecac, Podophyllum, and Verat. according to indications when brain symptoms began to develop. Apis was tried in vain. Ultimately I suggested Calc. Phos. and the 30th potency in frequently repeated doses effected a complete cure."

"Diarrhœa is very prominent and the stools are green and spluttering ; that is the flatulence (of which there is much) with the stool makes a low spluttering noise when the stool passes. I have made some very fine cures in such cases, where there seemed little hope for the child and hydrocephaloid seemed impending. The little patients were shrunk, emaciated, and very anæmic."—E. B. NASH.

Camphor.

This is a remedy that has been so extensively used in cholera that we should deal with its virtues at some length here. Camphor vies with Cuprum in its usefulness in choleraic diseases. Hahnemann observes :—"A receipt has been given to the world which proved so efficacious in Dun-burg in the Asiatic cholera that of ten patients but one died. The chief ingredient is camphor which is in ten times the proportion of the other ingredients. But not a tenth—nay, not one in a hundred of the patients would have died, had the other ingredients which were but injurious and obstructing, and the venesection been left out and the camphor been given alone and always at the very commencement of the disease, for it is only when given alone, and at the first invasion of the disease that it is so marvellously useful."

Joslin very truly remarks :—"During the prevalence of cholera in any locality, every person should consult his physician for such slight symptoms as often precede cholera. On such application to the physician, if he is a homeopath,

the disease may almost always be warded off or, if commencing in a slight form, immediately cured, and prevented from advancing into the form of cholera proper. The most usual premonitory symptom is a fecal diarrhœa, often so slight that it would excite no apprehension in ordinary times. Or the evacuations may be rather copious, or in moderate quantity and milky, no other symptoms being present. In any of these forms diarrhœa in the epidemic is called cholerine. It is often referred to as the first stage of the first variety of cholera ; the importance of an early attention to it is so great, that at the expense of some repetition, a familiar account of its symptoms and first treatment are given here, for the convenience of such families as may use this book, and physicians hitherto unacquainted with this practice.

Where there is diarrhœa without any special indication for any particular remedy, give a drop of Spirits of Camphor on a lump of sugar or in sugared water. Give another drop after an hour or earlier if the diarrhœa returns, and let it be followed by three doses of the third attenuation of Camphor at intervals of an hour or after each evacuation if it occurs sooner.

The Camphor may also be used for a short time, with advantage for most other symptoms ; but if this is domestic treatment, there should be no unnecessary delay in consulting a homeopathic physician ; as the disease may reach a dangerous height before the appropriate remedy is employed.

Where there is a decided attack of cholera, we resort from the first hour, or a longer or shorter time according to circumstances, to a treatment for which as well as for all the most successful modes of treatment the world is indebted to Hahnemann.

Whatever may be the form of the attack, give a drop of the tincture of Camphor, dropped on a lump of sugar, and then

dissolved in a table spoonful of cold water. Repeat this every five minutes, until there is a decided mitigation of the symptoms. This will usually be after five or six doses. One sign of its good effect is perspiration. In proportion as the symptoms yield, let the doses be at longer intervals, as an hour, two hours, twelve hours and even twenty-four hours. In these later doses, the third attenuation would be preferable. If the disease be taken in time, ten or twelve doses of the tincture are ordinarily sufficient.

In the preparation of this Spirits of Camphor, Hahnemann recommended the proportion of one ounce of solid camphor to twelve of alcohol. Dr. Quin used the preparation of one ounce to six. We ourselves use a similar preparation even now. Camphor is very extensively used now-a-days in India. The Camphor treatment of cholera is so well-known that it is used by many who do not believe in the homeopathic system of treatment. There is abundant testimony to the efficacy of pure Camphor treatment from all parts of Europe.

Hahnemann states that in Berlin and Magdeburgh alone, thousands of families having followed his instructions respecting the treatment of Camphor restored those of their members who were attacked by the epidemic—restored them in less than a quarter of an hour.

But I must say here that Camphor is seldom indicated where a physician is called in. Generally that stage is long past at the time. From the general ability of the early employment of Camphor, it is not to be inferred that the homeopathic physician will usually commence with it, when the family, instructed in its use, has given many doses of it previously to his arrival. His course of course will be divided by a consideration of the totality of the symptoms.

(*To be continued.*)

A CLINICAL CLASSIFICATION
OF APPENDICITIS—
COMPARATIVE RESULTS OF EARLY AND
LATE OPERATIONS.

WILLIS YOUNG, M. D., ST. LOUIS.

The following is an argument in favor of early operation whenever feasible in practically all cases of Hyperacute and Acute cases of Appendicitis. The argument is also in favor of operation in all cases, acute or chronic at some time in their course. For convenience of reference a classification of various kinds of appendicitis is necessary. The purely clinical classification as suggested by the late Prof. Fowler is exceedingly simple and altogether practical. Slightly modified for greater clearness it is as follows :

Hyperacute.—This case exhibiting symptoms of severity of inflammation and virulence of infection unusual in the average acute case.

Acute.—Those cases differing from Hyperacute only in the comparative mildness of their symptoms and their slower rate of progress.

Chronic.—Generally follows acute variety and subsides leaving the patient free from all but one or two objective or subjective signs of his disease.

Chronic Relapsing.—Same as chronic but with more or less frequent and severe relapses into acute condition.

Chronic Recurrent.—Those cases which have more or less frequent and severe acute attacks, the intervals being free from any sign of the disease.

Complicating.—Those cases occurring as a complication during the course of some other disease as Typhoid, Measles, Grip, Tuberculosis. In this class are also included cases

of appendicitis occurring during pregnancy. Two or more cases are recited in each class excepting the last two. Attention is directed to the results when early operation was made as compared to those following late operation.

Hyperacute—early operation : CASE 1. Mary L. aet 24. April 24, '08 at midnight was attacked with severe pain referred to umbilical region. Frequent vomiting, first of food, then bile. Seen at 10 A. M. 4-28-08. Severe pain over whole abdomen, tenderness great, and very acute at McBurney's Point Tympany. Is menstruating 3rd day. Temp. 101, Pulse 120-130. In the ambulance while on her way to hospital, acute pain suddenly ceased, nausea and vomiting at once subsiding. I P. M. Examination showed increasing tympany, general tenderness much diminished. McBurney's point still exquisitely tender. T. 100, P. 125-140. Diag. Hyperacute appendicitis with perforation probably occurring at time pain and vomiting ceased. Operation, 2 P. M., 16 hours after commencement of attack. Quantity of cloudy serum escaped as peritoneum was opened. Appendix gangrenous in three places—one of these perforated. No adhesions. Appendix removed and tubular drainage from operation wound made above Poupart's ligament. Fowler's position and continuous enteroelysis. Very free discharge from drains, soon became purulent, continues 4 weeks—closed part of wound healed primarily. This patient's life was saved by early operation.

Hyperacute—early operation : CASE 2. G. B. aet. 17. Has had "sore throat" for several days with headache, backache, rigors and fever. Home treatment,—free cathartics. March 1st, '08 at 2 P. M. had severe pain about umbilicus with vomiting. First seen at 2 P. M. same day. T. 102.2, P. 96. Some pain and great tenderness at McBurney's point. Rigid r. rectus lower half right leg constantly flexed. Diag. Acute

appendicitis. 5 P. M. operation at hospital 15 hours from commencement. Several ounces dark bloody serum escape on opening peritoneum. Appendix 5 inches long, swollen and rigid. It's peritoneum congested and with numerous sechymotic spots. Inflammation of all neighboring peritoneum. A few light adhesions. Appendix removed, cigaret drain for 8 days. Enterolysis for 12 hours. Recovery in 14 days. This case it may be argued "*might have recovered without operation.*" It *did* recover *with* operation and at the end of two weeks was *permanently* well. Any other treatment would have required fully as much time and left him exposed to one or more subsequent attacks—with either a difficult (from adhesions) interval operation or a dangerous (in the presence of pus) during a subsequent acute attack.

Hyperacute—late operation: CASE 1. Miss H. I. aet. 42. For several years has had attacks diagnosed as gall stone colic. Nov. 21-'06. During night severe pain over whole abdomen with vomiting. She endured this without seeking medical aid, fearing surgery might be suggested, until I first saw her on Nov. 28, 7 A. M. when her temperature was 98, pulse 144. There was vomiting, hiccough and sweating. Abdomen much distended but no great tenderness except at McBurney's point. No stool for 4 days. Diag. Diffuse purulent peritonitis from hyperacute appendicitis. It required no great skill to recognize this case as a forlorn hope. Nevertheless, under local anesthesia incision was made in middle line and a large quantity of pus evacuated. It was characterized by the peculiar odor occasioned by *Bacillus Com. Coli*. The patient died in an hour, the victim of appendicitis which should have been operated upon 7 days before.

Hyperacute—late operation: CASE 2. B. T. aet. 8. Illness began with acute abdominal pain, 7 days ago. He

has vomited but once. His physician first saw him July 8-'08 when his temperature was 103, pulse 140, abdomen distended and a watery diarrhoea present. Pain but moderate, having suddenly ceased 24 hours before, during which time he has slept almost continually. Tenderness at McBurney's point extreme July 10. P. 130, T. 100, no pain, tympany great, sweating. Diag. Diffuse purulent peritonitis from perforating appendicitis. Prognosis in accordance. *Operation*, about 72 hours after perforation supposed to have taken place. The diagnosis was fully confirmed by the operation findings and the prognosis by his death 15 hours later.

Acute—with early operation: CASE I. Mrs. C. aet. 37. Seen 7-2-07. Complaining of severe pain diagnosed as gall stone colic. Under narcotics she was able to endure the pain for 24 hours when it subsided. In another 24 hours jaundice appeared and pain as well, this time referred to the r. iliac region. Temperature rose from normal to 100.4, pulse 68. Condition unchanged for 5 days. Jaundice disappearing and pulse rose to 85. Tenderness and pain persisted. A diag. of acute appendicitis was made and operation performed 7 days after beginning of illness. Gangrenous appendix containing a good sized faecal bullet removed. Recovery prompt. In this case an attack of gall stone colic marked an attack of acute appendicitis which would better have been operated before perforation became imminent. Seven months later the gall stone colic repeated and a cholecystectomy was made. The bladder contained 35 to 40 small stones.

Acute—with late operation: CASE I. Complaining for a month of stomach-ache for which Kummel was taken freely. Three days ago pain became suddenly severe and vomiting began and continued. No tympany, moderate

tumor in r. fossa, but little tenderness, rectus very rigid. P. 96, T. 99 at 7 P. M. Operation next day delivered from a mass of adhesions a suppurating appendix which was endeavoring to perforate into the cecum and from which a necrotic spot the size of a silver quarter was excised. Fecal fistula followed to close in 5 weeks. Hernia followed in a few weeks. No argument is needed to convince one that early operation would have been safe, convalescence much shorter and hernia avoided.

Acute—late operation: CASE 1. J. R. Man aet. 21. Seen 7-24-07 sick 3 weeks with classic symptoms of acute appendicitis. Tumor, first noticed 2 weeks before, is enlarging and increasing in tenderness. During the first examination a copious movemet from bowels occurred which proved to be about a pint of almost pure pus—indicating that abscess had opened into intestine. 24 hours were allowed to elapse—no more pus appearing from rectum and symptoms not improved operation was made—a sloughing appendix removed and an abscess containing about $\frac{1}{2}$ pint of pus and faeces drained through operation wound. Prompt relief of symptoms followed. The faecal fistula closed on 23rd day. No hernia has occurred up to date. When this patient's physician was asked why he had not had the man operated early, he naively replied: "He did not ask to be operated on until day before yesterday."

Acute—late operation: CASE 2. A. H. aet. 24. Had been sick 2 weeks under the care of a physician who the patient declared never examined the abdomen despite his complaints referred entirely to that region. The case came into the hands of Dr. Edward Schulze with whom I saw him. The abdominal swelling was circumscribed and of the shape and size of a small water melon. His history pointed to appendicitis. The swelling unquestionably a huge abscess.

Incision high in median line opened into the urinary bladder flattened out on abdominal wall—this was closed and incision made to left of median line and fully a gallon of pus evacuated. No attempt was made to locate or remove the appendix—24 hours later his condition demanded intravenous saline infusion and which apparently kept him alive a few hours longer. "It isn't because we don't know Doctor, 'tis because we don't look."

Chronic—operation 3 months after 1st symptoms: 7-8-'07. First attack of abdominal pain diagnosed by patient himself as appendicitis, same pain has continued without interruption until 10-1-'07. Examination shows tenderness at McBurney's point—rigor r. rectus—T. and P. observed for next week. Morning T. 97-99, P. 60-110. Evening T. 98-100°6, P. 95-110. Patient complaining of losing weight, anorexia, great flatulence and mucus in stools. Diag. T. B. App. was without peritoneal effusion confirmed by operation and path. examination of specimen. Recovery from operation and pain very prompt but emaciation and mucous stools continued for 4 months. Since then patient has remained well.

Chronic—late operation: Mrs. S. 12-23-'06. Complaining of pain in pelvis for 2 years—which has been diagnosed ovaritis and salpingitis. Her temperature taken by herself for the last 7 months has rarely reached normal up to 100°5. Has lost much weight, strength and has become a confirmed invalid. Her physician had despaired of benefiting her by remedies faithfully selected and it must be said in justice to the patient, faithfully taken. She declared she "would rather die than submit to the knife" but like one of Byron's ladies—"swearing she would ne'er consent—consented." An astonishing mass of plastic exudate, fully 2 inches thick surrounded a not very vicious looking appendix. This was removed and wound drained. Recovery was slow but uninterrupted,

her general health improving. P. and T. did not become normal for fully 6 months (or during the period of absorption of the exudate). A small hernia followed in this case and one year after the 1st operation a herniation was made—Inspection of the appendiceal region at this time showed all structures normal—the exudate having entirely disappeared. The former location of the appendix could not be discovered (purse string and inversion method). Early operation in this case would have meant two years' freedom from invalidism and probably from post-operation hernia.

Chronic Relapsing—early operation: CASE I. A. F. aet. 38. Has had several mild attacks of "colic" and diarrhœa in last 18 months. Constant pain and discomfort in appendix. July 20-'07 the first severe pain was experienced, beginning in umbilical region and in 24 hours settling in r eliac fossa. Temp. 99.5-101.5, Pulse 80-110. A tumor formation was evident. All symptoms except tumor and tenderness subsided until 8-6-'08 when all returned. He was sent to hospital at once. The symptoms not having subsided 24 hours later an appendectomy was made—removing with some difficulty a chronic inflamed appendix from a considerable mass of exudate. The colon, ileum and parietal peritoneum were studded with small white tubercles which in conjunction with the pathologic findings in the appendix establishes the case as one of Tuberculosis appendicitis. A temperature of 99-100 continued for 10 days and then departed permanently. This operation was an *early* one as far as any severe acute exacerbations were concerned. Had the patient been properly examined and a diagnosis made of his mild attacks of colic—he would probably have escaped the possible dangers of operation during an extension T B peritonitis.

Chronic Relapsing—late operation: CASE I. Girl aet. 8. Typhoid at 3. Measles at 4. Endocarditis at 6. A severe mitral

lesion with insufficient compensation remains. This was a "late" operation in relation to the severity of the attacks although the first one occurred in September 1907. It lasted one week and her general poor health was badly damaged by it. Although pain slight and elevation of temperature continued, active interference was not yet undertaken. In Dec. 1907 a very severe recurrence took place and her life was despaired of for nearly a month. Feby. 1-'08 she was brought for operation—despite her anæmia and bad heart lesion was subjected to appendectomy—a suppurating appendix removed from a small abscess. Her convalescence was good and in June her physician reports her in fine health. A dangerous condition was successfully managed—but operation after the first attack would certainly have been safer to the patient and incidentally more comfortable to the operator.

Chronic Recurrent : It will not contribute to the purpose of this paper to recite cases of this class since operations are almost uniformly successful—as they are commonly made in the interval between attacks. It is of course true that many recurrences use up vitality more than a few recurrences and that to delay operation only postpones the inevitable. Meantime the patient's health is handicapped and his life may at any time be jeopardised.

Complicating Appendicitis : In common with the preceding class is mentioned only to complete this particular clinical classification. Cases of this character are of special interest and should receive special consideration and this may be done at another time.

2344 Park Avenue.

—The Clinical Reporter.

PERNICIOUS ANEMIA.

Pernicious anemia is a most dangerous disease. When well established, cure in most cases is out of the question. But in the beginning we can do a great deal, in fact beautiful cures can be effected. Even in cases declared hopeless we can achieve wonderful effect and give the sufferer great comfort.

We have often come across cases of long suffering from malarious fever and enormous and injudicious use of big doses of quinine. In these instances blood corpuscles are so much deteriorated and their number is so much reduced that nothing can be expected from treatment.

Many of such patients—the victims of this disease—are poor women who suffer from frequent child bearing and are forced to reside in most unhealthy localities in big cities. Insufficient and unhealthy food, frequent hemorrhage or other discharges play an important part in the causation of this disease. Judicious homeopathic treatment with indicated remedies, backed by easily digestible and nutritious food and living in well ventilated houses with plenty of sunshine, can do much in the way of cure and palliation

Following remedies may be tried with good result:—Arsenic, China, Chininum ars, Phosphorus, Plumbum, Picric acid, Ferrum phos and Zincum. Argentum nitricum in high potencies should also be considered in this connection.

Arsenic is one of the very efficient remedies in cases of pernicious anemia. All the symptoms clearly show the close relationship between the disease and this remedy. Its profound exhaustion, deficient blood supply, weak action of the heart, malarious origin and loss of fluid, all point towards Arsenic.

Many authors are of opinion that this remedy should be given in material doses and frequently repeated. We do not

endorse these views. We know that when well indicated higher potencies with infrequent repetition act well. Next to Arsenic, China and Chinin arsen are two well indicated remedies in cases of pernicious anemia. China is an excellent remedy in such cases. Its profound exhaustion from hemorrhage and loss of semen, long continued nursing &c., sensitiveness of nerves with general weakness, weakness after mental exertion are characteristic.

Dr. Allen in his Hand Book speaks of anemia in the following terms :—

Anemia with extreme debility from nursing or from loss of blood. Rapid emaciation, with indigestion, voracious appetite, undigested stools, copious night sweats. Purpura hemorrhagica of the nursing, with roaring in ears, cold, clammy skin, painless diarrhoea, which may be bloody Leucocythemia.

We have seen a few doses of the higher potency act marvellously.

Chininum ars. has many symptoms in its pathogenesis which clearly show its curative virtue in cases of pernicious anemia.

Tired feeling, palpitation on leaning against back, sensation as if heart stopped ; trembling, weariness and pain in several joints. In diseases after prolonged suffering from marsh malaria, it is very useful.

Picric acid is also a very useful remedy in such cases after prolonged mental labour, brain fag &c. Dr. Allen says that it causes profound alteration of the blood, even disintegration of corpuscles ; degeneration of the spinal cord, with paralysis, inflammation of the kidneys.

It has tired and nervous feeling. Disinclination to mental and physical work. Mental prostration after reading a little or after writing a little. Inability to collect thoughts or to study. Noises in ears and vertigo. These symptoms are often

found among our public men and studious people. They frequently suffer from pernicious anemia of a bad type and ultimately end their lives untimely.

Zincum produces depressed condition of blood and nervous system generally. So it is one of the important remedies for pernicious anemia. Its symptomatic indications are clear and decisive. Emaciation and weakness, face wrinkled and bluish. Paleness of mucous surfaces and atrophy of muscular tissues. Phosphorus is a very important remedy in this condition of the system. Mucous membranes pale and muscular system lax. Ataxia and adynamia are perfect. Emaciation great. Weakness from profuse hemorrhage. Weakness all day with oppression. Nervous exhaustion, with general heaviness, desire to keep to bed and dread of motion. Fatty degeneration of red blood cells.

All these symptoms and conditions are well marked in cases of pernicious anemia.

Diet of the patient plays an important part in the treatment of pernicious anemia. Nourishing and stimulating food is absolutely necessary ; at the same time it must be easily digestible and should be well assimilated.

Dwelling places should be well ventilated and plenty of sunshine is required. Perfect rest from work should be enjoined.

P. C. MAJUMDAR, M. D.

CLINICAL CASES FROM NOTE BOOK

By W. J. HAWKES, M. D.,

Los Angeles, Calif.

Chronic Headache. Female, aged thirty-eight. Has had a severe headache for the past year or more. The head aches all over

with a terrible, drawing feeling. She often wakes with it, and it is always worse in the morning. The paroxysms are gradually increasing in frequency and severity. She now has them as often as twice a week. Her occupation is sewing with a machine. She becomes unconscious while at her work, and drops her head forward on the machine, remaining unconscious for a time. The head sometimes feels large. She thinks intensely upon trivial matters. There is much heat about the vertex. She says she is perfectly well in every other respect ; but, on being questioned closely, says her feet often get cold, with burning in the soles at night ; she gets very weak, and has an empty, gone feeling in the abdomen if she goes without her meals longer than usual, and sometimes even an hour before the usual time, especially before the noon meal. She is very sensitive to cold air, (but craves fresh air to breathe) and to the external application of cold water. Feels tired after waking in the morning. A red spot comes on her tongue which feels as if burnt. She is of "light" complexion. The family history is good, the parents living to a good old age ; her mother died of paralysis.

Sulphur was prescribed, the decided symptoms being "headache, with heat on vertex ;" "faint, empty feeling an hour before dinner-time ;" "cold feet, with burning on the soles at night," and "sensitiveness to cold water," all of which are strong symptoms for the remedy.

The patient reported, in two weeks, a marked general improvement, having had but one paroxysm during that time. At the end of three weeks, she is still improving and very much better. She did not return.

Ague—Male, aged twenty-seven. Has had chills and fever for five weeks. Was in Missouri, but was not seized with the ague until the next day after returning home. Has taken quinine, "boneset tea," and lemons and salt. The chills came every day, and at first were postponing. They now come every second day, and 1 P. M. Thirst during the chill and sweat, but seldom during the fever. Terrible headache during chill ; the headache is his principal

grievance. The urine cannot be controlled, and "looks like boneset tea." He craves much salt in his food.

Natrum muriaticum was selected as the remedy on account of the prominence of the head symptoms and the craving for salt. The chill of this remedy usually comes on about 9 or 10 o'clock A. M. every other day, and is accompanied by a terrific headache. When this medicine is indicated the desire for salt is nearly always present. The time of the coming of the chill is often deranged by drugging.

As is usually the case when natrum is indicated and is given in the proper potency, the patient had one slight chill on his next chill day, and that was the last. The potency in this case was the 200th.

Diphtheritic sore throat. Female, aged twenty-eight, is troubled with what is usually called diphtheritic sore throat. The tonsils are much swollen, the right being dotted all over with grayish-white patches, the left has a few spots. Much headache and backache. Pain extends from throat to the ears, especially the right. Raises much tough, stringy mucus, which is so tough and ropy that she can scarcely wipe it off.

The characteristic symptoms in this case are the isolated patches; pain running from the throat to the ears; and, best of all, the tough, stringy expectoration. When this latter symptom exists as markedly as it does in this case, no matter in what pathological condition, kali bichromicum is the remedy, and will surely help the patient.

Neuralgia. Male, aged forty-six. Has had neuralgia for two years. The teeth became loose and the gums ulcerated. Had section of the nerve made for its relief. The pain immediately went to the left ear, and now he is deaf in that ear. Had his hair cut in June, and caught cold therefrom. The trouble came the following August. The pain often comes suddenly, and is worse in cold weather; it changes from place to place, but centers in the ear. He is continually in pain when cold. The eyes and the nose often become red while the pain is severe; the eyes filling with mucus

in the morning. He cannot sleep at night, and feels wide awake.

Belladonna was given because of the neuralgia from taking cold after having the hair cut ; the pain comes suddenly ; the eyes (and nose) are red while in pain. Pulsatilla was also thought of on account of the changeable nature of the pains, and the condition of the eyes in the morning. But the former remedy seemed best indicated, and was given.

A week later he reported no better and the further symptoms were elicited that he had a thick, yellow, catarrhal discharge from the nose in the morning, and had a special dislike for fat or greasy food. Pulsatilla was prescribed. The patient reported at the end of another week that he had been as well as ever nearly the whole week, but the last day he had a return of the pain. Felt generally better. Remedy continued.

Erysipelas and neuralgia. Male, aged forty. This man has erysipelas and also neuralgia about the heart ; sometimes the one comes first and is followed by the other, and *vice versa*. The erysipelas centers about the left eye, and spreads from that point to various distances over the face and head. It is accompanied by a smarting, burning sensation. It first appeared five years ago after having taken cold while overheated. Has had rheumatism frequently, which is always worse in extremely cold or extremely hot weather. Active exercise, such as running or rapidly ascending the stairs, produces palpitation of the heart. He is restless and sleepless at night, especially about midnight ; cannot sleep because he is so restless, tosses about and cannot find an easy place. The neuralgia is worse at night, with much pain around the heart if he lies on his left side. Gentle motion relieves all the painful symptoms.

There is no doubt that, in this case, all these groups of symptoms—erysipelas, neuralgia about the heart, and rheumatism—each of which is misnamed a disease, are branches of the same root. Exactly what the nature of the root is, may be a disputed question. My belief is, that this root, or cause, is a morbid impression upon

the nerve centres, which deranges their functional action. There is no organic change in the organs or tissues in which are developed the evidence of this wrong working of the governing nervous power.

If I am wrong, how will the infinitesimal dose of rhus tox., that I prescribe, accomplish a cure? It will cure. If I am right, how comparatively easy to explain the otherwise inexplicable power of our materially small doses. The nervous system governs all. A thought, an emotion, (no material) deeply impresses the nervous system.

Rhus tox. was prescribed, the guiding symptoms being the exciting cause ; the period and conditions of aggravation—worse at rest, better from gentle motion, worse at night, especially about midnight, when he is so restless that he cannot lie still ; rheumatism : erysipelas.

The patient reported, four weeks later, that he had been almost well up to within a day or two, when he had taken a violent cold. He rested better, had less pain and less palpitation, could exercise more freely without producing heart symptoms ; and was, in fact, better in every respect, except that the erysipelas was more persistent.

This is a good sign. While treating chronic disease, the more pronounced the skin symptoms, the more encouraged we should be. Continued the same remedy.

Bronchial cough—Eczéma—Female, aged fifty. Has had a cough for months ; apparently caused by taking cold ; worse in the morning for a half-hour after rising ; strumous diathesis ; has "salt-rheum" on the feet, which is worse in warm weather ; there is a watery discharge from the eruption on the feet ; feet burn and itch intolerably ; "wants to tear them all to pieces ;" white, tough expectoration. Has hot flashes, followed by weak, faint spells through the day ; faint, empty, hungry, gone feeling about 11 A. M. ; feet burn, especially on the soles, at night ; she desires cool air to breathe but it chills her ; there is also a tendency to morning diarrhoea.

Every symptom pointed to sulphur, which was prescribed in the 30th. One week later she reported the cough gone, feet symptoms worse. "Wants to put them out of the window at night, they are so

hot." At the end of the second week, the report was generally better ; no return of the cough. At the end of the third week, the report was still better ; less eruption and less burning.

Dyspepsia vs. heart disease—Woman, aged thirty-four. Has had palpitation of the heart for nine years. She is the mother of four children, and has never felt well since her first child was born. She has "sick headache," which is blinding, and causes sour vomiting. The head feels large, and, at times, cold on the top. Appetite is fair, but "food lies heavy on the stomach." The bowels are constipated, with ineffectual urging to stool. She does not sleep well, waking frequently about 3 A. M., with restless, unrefreshing sleep after that hour. The feet sweat much. Some of her symptoms are worse in the open air ; better in warm room. The palpitation of the heart is what she is most anxious about, fearing heart disease ; but examination reveals no abnormal sounds nor movements of the heart or pulse ; while the gastric symptoms are sufficient to account for the palpitation, which is, without doubt, the result of indigestion. This is true of a great many cases of so-called heart disease.

The remedy indicated is *nux vomica*. The characteristic symptoms are : Sick headache ; the head feels too large ; the food lies heavy on the stomach ; constipation, with ineffectual urging ; she awakes about 3 A. M., with restless, unrefreshing sleep thereafter, and is worse in the open air.

The patient reported no more headache ; has had no headache during one month ; formerly had it about once in two weeks. One week later, reported having felt better during the last week than for years ; her heart troubles her scarcely at all ; the appetite is good ; bowels are natural and regular, and she sleeps well.

Asthma.—A man, aged fifty-two, and very fleshy. He took a hard cold before he had fully recovered from a severe attack of measles. This was followed by asthma. He was attacked in the night, about midnight, suddenly, and was compelled to immediately sit upright in bed in order to get his breath. He has forgotten how long this paroxysm lasted ; but the attacks returned at first

about once in four months, but are much more frequent of late. They come at any time of the night or day, and continue for eight or nine weeks. They are so severe that he cannot lie down at all, and are "the torment of his life." They are worse from inhaling dust. He cannot take a long breath on account of pain in his right side, nor can he exert himself for lack of breath. There is no history of asthma in his family.

Cold air or water affect the patient unfavorably ; he likes to be wrapped warmly ; is thirsty for cold water, which at one time distressed the stomach and caused vomiting ; not so much so now. There is always a severe cough during the attack, with a yellowish or greenish expectoration. He has slight pain in the small of the back, and occasional neuralgia below the spine of the right scapula. The stools are dark.

Arsenicum 200 was prescribed because of the time and character of the attack ; the cough, compelling him to sit up in bed ; the sensitiveness to cold ; the relief from heat ; the thirst for cold water ; which distressed the stomach, etc.

The patient reported in four weeks that he had improved steadily ever since he had begun the use of the medicine ; the improvement was general and marked.

Colic : A man, aged fifty-two, has been subject to a species of colic for five years. He first drank ice water excessively when heated, and a violent attack of colic followed, which continued for three days. This was five years ago. He has an attack every time he takes the least cold, which he does very easily ; and also after drinking anything cold. He vomits easily. The bowels have been constipated for ten years. Appetite is poor. He is weak, but does not lose flesh. He desires a great deal of cold water, but dares not drink it for it causes either vomiting or colic, or both. The present attack began three days ago. He likes cold air to breathe, but it chills him and causes him to take cold. Sometimes he has two or three attacks in a week. He cannot keep from taking cold, and so sure as he exposes himself he has an attack of colic. He is very nervous, but sleeps well, and wants to be "wrapped up warm."

It is not often we meet with a case of colic which has been almost continuous for five years, as this one virtually has. It will be interesting and instructive to watch the case and see whether or not our potencies will cure it, both on account of its chronic nature and because he has been trying other means during the whole of that period.

The remedy indicated is arsenicum, unquestionably, on account of the following symptoms ; the cause, i. e., drinking ice water while heated ; attacks induced and aggravated by drinking cold water ; thirst for cold water, which distresses the stomach ; vomits easily, with irritable stomach, great sensitiveness to cold air ; wants to breathe cold air, but is chilled by its external application ; loss of strength : nervousness.

It will be an interesting clinical fact if the arsenicum shall remove the constipation of ten years' standing.

This patient was first prescribed for on October 16, when he took the remedy in the sixth potency. October 21, the report was "Colic gone after the first few doses ; he is all right, and the bowels are normal." October 30—"Had colic last Wednesday and Saturday, but not so severe as before taking the medicine ; the attacks were caused by colds. Bowels are still constipated but less so ; feels better generally ; appetite is good, but dare not drink cold water." November 6—Had colic twice since his last visit, but shorter and less severe ; bowels more free ; cold water does not now disagree ; the last attack less severe than the previous ; is not so chilly in the cold air ; is stronger ; the appetite is good. December 4—Reports steady improvement. December 18—Patient has had but one light attack during past two weeks, and that lasted but two or three minutes, and was scarcely perceptible. He feels almost well ; appetite is good ; is stronger in every way ; bowels are regular, and he does not mind ordinary cold ; "can eat and drink like other people."

This patient had the medicine in the sixth the first week ; the second week, *sac lac.*, and afterwards the medicine in higher potency only twice.—*The North American Journal of Homœopathy.*

Clinical Cases.

P. C. MAJUMDAR, M. D.

I.

Mastoid Disease. Capsicum :—Sovan, a robust youngman, had been suffering from otorrhia for a long time. The pus used to come from right ear every now and then. But in the month of July last there appeared a great deal of swelling and pain in the region of mastoid process.

The pain was intense, had no sleep and sometimes he was like a mad man. He felt burning, shooting and lancinating pain, more in the afternoon, when he had a chilly feeling and subsequent heat and burning of body.

Great redness of the part with considerable swelling which was hard and tender.

Belladonna 30 and subsequently 200 was given without any improvement at all. Bowels always constipated but now became loose with frothy, greenish stools streaked with blood.

Considerable thirst but drinking caused chilliness. He had dyspepsia before.

Capsicum 6x morning and evening for six days.

The effect of this remedy was wonderful. Pain disappeared at once and swelling also went down. He required no more medicine.

II.

Dental Fistula. Fluoric acid :—Panchu, a book-binder, had been suffering from dental fistula for a long time. He was treated by allopaths without benefit. He became pale, his appetite failing, bowels constipated.

Thick yellowish white pus coming out in good quantity on pressing the gums. Gums were tender and loose.

Complained of acidity and tired feeling after slight exertion.

Fluoric acid 30 cured him in three weeks. He gained in strength and flesh after a few days of his recovery.

III.

Diabetes mel. Rhus Arom :—Babu Mahendra Nath Ghose, aged 35, thin and anemic looking, had been suffering from diabetes for two years and took various kinds of medicines. He came to me on the 11th January 1906. Urine many times in twenty-four hours, always in large quantity and nearly colorless.

Specific gravity 1032, and contained about 12 grains of sugar per ounce of urine.

No specific history except that he complained of erratic rheumatic pains in various joints, specially of the lower and upper extremities. Burning of the whole body. A good deal of thirst and large quantities of water taken.

Feeling of exhaustion, especially after office works, when he felt run down and bruised feeling all over the body. Appetite moderate and natural stools passed every day.

There were acid feeling and heart-burn.

I gave him Ars 30, morning and evening. This he took for one week and reported no better.

Rhus arom 6x one dose, twice daily. This had a desired effect at once.

Urine reduced in times and quantity.

Burning sensation stopped and he gained strength. Rheumatic pains also disappeared. In fact after continuing the treatment for about a month, he was perfectly restored to health. No more examination of urine had been done.

IV.

Herpetic eruptions. Graphites :—Babu K. Dutt's wife, a fair looking plethoric lady, had been suffering from herpetic eruptions in various parts of the body specially on the back and extremities.

They were itching violently, more at night.

Bowels obstinately constipated. Stools hard and knotty

and of black color, appetite poor. Complained of acidity and heart-burn.

On the 24th Decr. 1906. I gave her a dose of Graphites 200, followed by placebo, once a day, for one week.

3d January 1907. Improvement marvellous. Continued placebo.

Acidity and heart-burn were considerably relieved and bowels more regular.

Placebo continued for another week and she got rid of the eruptions.

This kind of happy result is seldom found in skin affections, specially herpetic eruptions which are always very obstinate. This cure has the effect of converting this family to homeopathic treatment. I was very particular about the diet of this lady. All animal food had been strictly prohibited. Fruits were given freely. Sweets were withheld.

HINTS.

For "neuralgia," no guiding symptoms, just neuralgia, *Magnesia phos.* 12x is as good a random shot as can be made.

Lycopodium 6x trituration has been commended in "chronic rheumatism and sciatica of long standing." Probably the 30th potency would act better. In the latter potency it is said to be a great remedy for the almost undefined ills of old persons.

Where there is "scratching, burning and dryness of the throat" *Lobelia inf.* is the remedy. .

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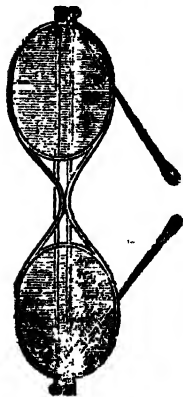
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Vol. XVII.]

OCTOBER 15, 1908.

[No. 10.

THE CALCUTTA HOMEOPATHIC HOSPITAL.

After a protracted course of mature deliberations the Executive Committee of the Calcutta Homeopathic Hospital has secured a plot of ground at No 265 Upper Circular Road whereon Messrs. Martin & Co, the well known architects of Calcutta, are going to build a suitable building for the accommodation of patients, for the outdoor clinic and for the dispensary.

It is proposed to lay the foundation stone about the middle of January and we hope to enter the buildings and begin active work before the year is over.

It is with much pride and great satisfaction that we announce before the public the liberal support and the handsome donations that have been made by the patrons of Homeopathy.

The late Maharaja Jatindra Mohan Tagore promised a donation of rupees eight thousands which, we dare say, will be most gladly paid by his worthy successor, our illustrious townsman, Maharaja Sir Pradyot Kumar Tagore. A very handsome donation is expected from Raja Guru Prasad Sing,

the renowned landholder of Monghyr. Raja Budh Sing Dudhuria of Azimganj has also promised a large donation. Our grateful thanks are also due to many other noblemen and gentlemen who are contributing most liberally towards the hospital fund. We are meeting with encouragement wherever we go. But still there remains a great deal to be done, and we shall require about one lac and fifty thousands rupees to start with. It is therefore that we make an appeal to the public for supporting this institution. To quote the words of the honourable Mr. Justice Sarada Charan Mitter—"A Hospital is absolutely necessary for the town of Calcutta."

Subscriptions and donations will be thankfully received by the treasurer : Dr. D. N. Ray, Ray Lodge, 62-2 Beadon Street, Calcutta.

CHOLERA ASIATICA.

(*Continued from page 266, No. 9, Vol. XVII.*)

Hahnemann's instructions* as to the use of Camphor at the onset of a cholera attack had been issued on the 10th. September 1831.

Two months afterwards Dr. Quin was at Tischnowitz in Moravia, whither he had gone to assist in treating cholera patients. He had soon an opportunity of testing in his own person both the effects of cholera and the effects of Hahnemann's recommended remedies. Here are the words in which he describes the attack on his own person "I fell to the ground insensible ; (no premonitory diarrhœa !) carried at once to bed. I had recourse to the Spirits of Camphor as soon as I had recovered my senses ; and after six doses the cramps, the retchings, the sensation of burning at the stomach, the feeling of sinking and prostration,

* Lectures on Cholera by L. Salzer.

the vertigo and the feeble and slow pulse sensibly diminished. The borborygmi, the great coldness of the face and extremities and their blue, mottled colour, continued for sometime longer and gradually disappeared. The action of the bladder did not return until twenty-two hours after the attack. Slowly the other characteristic symptoms also abated ; but for some days though rescued from instant death there remained a livid circle round the eyes, there was occasional headache, giddiness and constriction of the chest." Interesting and instructive as this case no doubt is in itself, it becomes the more so, from the fact, that it was the first of many more similar cases which were soon afterwards taken up by Dr. Quin, and treated by him according to Hahnemann's instructions, with a result shown in the annexed table sent to him by the Chief Magistrate of Tischnowitz :—

*		CASES OF CHOLERA	CURED	DIED
Allopathically treated	...	331	229	102
Homeopathically treated	...	278	251	27
With Camphor alone	...	71	60	11.
Inhabitants 6671		680	540	140

Dr. Salzer further observes :—I believe, gentlemen, after what I have said, you will agree with me, that the homeopathicity of Camphor to such choleraic attacks as described by Hahnemann, has upto this day remained undemonstrated and undemonstrable. It is only by the aid of Allen's collection of cases of true camphor poisoning as recorded in the 10th Vol. of his *Encyclopedia of Pure Materia Medica* that we for the first time get a true insight into the therapeutic relation between the effects of camphor and the first stage of the spasmodic variety of cholera, "with

its tonic, spasmodic character^b as Hahnemann described it ; for we have seen that Camphor in full and poisonous doses is a powerful exciter of the motor nerves, capable of causing both tonic and clonic spasms, thus being homeopathic to the first stage of the spasmodic variety of cholera.

Having dealt with the history of this valuable drug, now we shall try and enumerate some of the leading characteristics of the drug, for after all the totality of symptoms is always the sole guide for the true homeopath. For to administer a drug because of its utility in the so called first, second or third stage of a disease is a most unsatisfactory way of doing things. Here is a case to the point :—

A very rich upcountry Zeminder who was living in Calcutta, had an attack of cholera. Two very eminent homeopathic physicians were called to attend on him.

My late grandfather Dr. Behari Lall Bhaduri who happened to be one of the physicians was of opinion that the patient should have Cuprum for he elicited all the symptoms of Cuprum, but his colleague insisted on giving Camphor as he considered it to be a case in the first stage of the spasmodic variety of cholera. Accordingly Camphor was administered and the remedy seemed to have had a most disastrous effect, so much so that we have not been able to forget the effects of it even to-day. The patient died almost immediately.

Bell says :—In cholera great sinking and collapse, sometimes without stool or vomiting. Cold as death, but cannot bear to be covered. Camphor is useful in the very commencement of diseases of the bowels ; later stages presenting similar symptoms, requiring Verat, Cuprum &c. *"In Camphor collapse is most prominent ; in Verat all the evacuations and vomiting, in Cuprum the cramps"*—Danham.

Stools :—The stools are generally brownish or black, watery and like coffee grounds.

Bad effects of shock from injury, surface of body cold, face pale, blue, lips livid, profound prostration.—Allen.

Surface of the body cold, yet cannot bear to be covered ; throws off all coverings (Merc., Secale). The tongue is cold, flabby and trembling (Lach.). *Nose cold and pointed*, anxious and restless, *skin and breath cold* (Verat., Jatropha.) In the first stage of cholera, severe long lasting chill (Verat.)

Great coldness of the body with sudden and complete prostration of the vital force. It is often a very useful remedy in pernicious intermittents. The pulse is very weak, extremely small, and scarcely perceptible.

Here are a few cases from Dr. Salzer's Lectures :—

N. G., aged 21, a woman of intemperate habits, when walking in the streets to-night at half past eleven, she was suddenly seized with severe cramps in the abdomen and legs. She would have fallen, had she not been supported and led into the house. We saw her first at 12 P. M., on the 21st. October. Her abdomen was much swollen, she had severe cramps in the legs, shivering and coldness all over the body. Frequent muttering delirium, tossing about the bed, complained much of cold. Great desire to vomit, little rejected, pulse slow and weak

Tincture Camphor in water every quarter of an hour.

22nd. one A. M. much better. •

Mis. T., aged 23, subject to dyspepsia attacks. She awoke this morning, 4th November about 6 A. M., with vertigo, nausea, and pain in the epigastrium. We first saw her at 7 A. M. the same day. She had vomited (three times in an hour) a large quantity of greenish watery liquid. She complained of pain in the head and the stomach. ~~• Skin cold,~~ pulse 120 irregular ; painful dry retchings, no vomiting.

Tinct. Camphor every 10 minutes. One P. M. no vomiting ; occasional pains in the stomach and through her head ; taken no food, rather thirsty. Continued Camphor every half hour until relieved. 5th November noon—Says she is better ; has weight and pain in epigastrium, and feels a little nausea.

Camphor continued 6th November 2 P. M.—She is sitting up and is quite well.

R, aged 4, was quite well to-day, 11 December. While sitting playing, about 3 P. M., she cried out suddenly on account of pain in her bowels, and when relieving them began to vomit white frothy fluid. She became stiff, cold and blue particularly below the eyes ; complained of pain in her belly and fainted, no urine since forenoon. Seen at 9 A. M. and ordered Camphor half hourly.

12th 9 A. M. After a few doses of Camphor went to sleep ; slept well and perspired ; urinated this morning. Is up playing and seems well.

Dr. Salzer has reported many more cases illustrating the excellent results of Camphor.

Besides the ordinary tincture of Camphor as recommended by Hahnemann and also the tincture as prepared by Dr. Rubini, Dr. Salzer has recommended a trituration of Camphor that should be used 10 grains for a dose. It contains 1 grain of Camphor to five of sugar of milk.

Camphor antedotes nearly every vegetable remedy ; also tobacco, fruits containing prussic acid, poisonous mushrooms, should not be allowed in the sick room in the crude form. It should not also be carried with homeopathic remedies in the same box. It should generally be carried in a well sealed box very carefully.

Cantharis or the Spanish fly.

Though not a remedy for the true choleraic evacuations

proper, still it is an invaluable aid in the later stages of the disease, where there is a likelihood of uremia supervening in the course of the disease. But the symptoms of *Cantharis* are clear-cut and unmistakeable and abuse of the drug like that of any other remedy in the homeopathic materia medica, is fraught with very far reaching mischievous results.

The stools of *Cantharis* are not very characteristic.

Stools :—Passage of pale red, white or tough mucus, like scrapings of the intestines, with streaks of blood.

Constant urging to urinate, passing but a few drops at a time, which is mixed with blood (sudden desire to urinate and intense itching in the urethra Petrosel), violent tenesmus and strangury; burning; cutting pains in the urethra during micturition.

There is a persistent violent urging to urinate, with great tenesmus. Urine is passed only in drops and seems like molten lead passing through the urethra, so intense is the burning. There is with this usually an aching in the back.

The burning pain and the intolerable urging to urinate is the red strand of *Cantharis* in all inflammatory affections.

Three years ago I had occasion to treat a very rich lady in the suburbs of Calcutta, who was suffering from a very severe attack of cholera. There was another local physician attending the patient. I was called in when the disease was at its height. With *Colchicum*, *Verat alb* and *Arnica* I managed to abate all the other symptoms of the patient and she was apparently getting on well but she did not pass any urine and that caused considerable anxiety in the patient's family.

Now my poor colleague suggested we should give *Cantharis* to the patient as she was not voiding urine. I told him that as the patient had no symptoms of *Cantharis* and as the improvement in her general condition was gradual

and steady, I would not give her any medicine and so kept her on Placebo. The patient had no symptoms of uremia, and the patient passed a copious quantity of urine the next morning in the natural course of events.

Now my colleague showed me a Vernacular book in which it was advised to give Cantharis if the patient did not pass urine, regardless of the symptoms. This is really a dangerous practice. Hahnemann strictly enjoins us not to interfere with the patient in any way so long as the improvement continues. In fact this sort of meddlesomeness is very injurious.

(*To be continued.*)

Clinical Cases.

A case of fever in a young baby about three years old. The child had been suffering from fever for about 14 days. He was under homeopathic treatment from the beginning. Got apparently all right four or five days ago and then had a relapse. The bowels were constipated. The fever ranging from 99 to 103°.

When I visited the patient about 5. P. M., I found him in high fever with great restlessness; he was tossing about in bed. He was vomiting blood in great quantities which had scared the family very much.

This patient passed a large worm 2 or 3 days ago. Aconite 3x every hour.

The patient was all right the next morning. Only grinding the teeth at night which was very troublesome. Had only two doses of medicine when the fever left him and there was no more blood vomiting. Cina 200 one dose

The patient has been continuing well since that day.

Only the spleen is still perceptible. Recommended an occasional dose of Natrum mur.

A case of fever in Herambo Das's Lane. A girl of about eight or ten years of age. The fever began while the child was in a malarious place. Received quinine and other allopathic medicines without much effect. Was brought down to Calcutta yesterday. The bowels were fearfully constipated. The fever ranging from 100° to 103°. There was slight chill. Complained of pain in the small of the back, as in the joints of the hands and feet. The fever was generally worse at night. The child was very precocious. The spleen was slightly enlarged. Rhus tox 30, three times a day.

The next day I got the report that the child's temperature was 99.08. ; felt better ; placebo, 3 doses.

No fever the following day. Placebo continued.

The child had been free of fever ever since, but complained of constipation. Nux vom 30.

Had no return of the fever (Discharged cured).

J. N. MAJUMDAR, M. D.

SOMETHING ABOUT GOAT'S MILK : WITH REFLECTIONS.

BY A. GARFIELD SCHNABEL, M. D., TUCSON, ARIZONA.

*Formerly Demonstrator of Bacteriology and Pathology, Cleveland
Homeopathic Medical College.*

When one stops to reflect upon the many articles that are suggested and put upon the market as infant food, if he be conscientious in his work, he will hesitate and be sure of his ground before he will offer to the critical medical profession, anything new. I

doubt not but that every physician who shall honor this paper by his reading, has some one baby food that he "ties to," and if you tell him you have something better, he'll tell you, "I am from Missouri." However it is a self evident fact that no very satisfactory food has as yet been found, else our shop-shelves would not be filled with a score or more of baby foods, and our records be filled with infant mortalities. What I have to offer is not new, but an old article dug up and polished a little with two years of experiment and experience, for I believe goat's milk has been used as an article of food, since the time of Babylonia, and those of you, who have sojourned in Europe know it is a common article of food there even to-day

My attention was first attracted to goat's milk as an infant food about ten years ago. While reading a story in German, I was particularly impressed by the fact that the baby hero of the story regained his health by the old doctor prescribing goat's milk for him to drink. That impression was a lasting one, so when it became necessary for my boy to be weaned at four months I naturally looked for a goat. She was obtained and the youngster has thrived on it ever since. So satisfactory was the use of the milk, that I resolved to try it with other babies and invalids. I purchased eight nannies and have furnished milk to twenty-five babies and ten consumptives, and from these experiments and information taken from Bulletin No. 68, Bureau of Animal Industry, I have the following to submit in favor of the goat.

I. Goats are easily kept. It requires but a small dry yard and a warm shed to make a comfortable home for a goat. It costs about \$1.50 per month for her feed in this country where hay and grain are high. This enables every household to have first, a *fresh milk supply*. Goats are milked from two to four times a day and may be milked as many times as the baby is fed, provided she is milked dry each time. Good goats yield from two to four quarts of milk per day, some species as much as seven quarts. Second, a *pure milk supply*. The bacterial count of goat's milk obtained under good circumstances is less than 1000 per C C and usually below

500 (cow's milk obtained under the very best circumstances is rarely less than 10,000 per C C.)

II. Goats are by nature very clean animals. Their excrements are of such a nature that a few minutes' contact with air and sunshine makes them dry and compact and not easily pasted and smeared upon the animal's hair and udder. Goats do not lie down in filth, but seek dry places. (Compare this with cattle.)

III. They are practically immune from infectious diseases and especially tuberculosis, the percentage being about .001. It is stated in Paris that out of thousands of animals slaughtered not one was found to be affected with tuberculosis (cattle have a percentage of from 35 to 51%). And not only this but it has been proven that one tubercular cow in a herd will render the milk from a whole herd tuberculous, that is it will contain tubercle bacilli from the fact that her excrements contain millions of tubercle bacilli. The excrements coming in contact with the food will make the excrements of other healthy animals contain bacilli. It is practically impossible to obtain milk which is not contaminated with the feces. (Bulletin No. 99, pages 12 to 20.)

IV. A goat is the only natural foster mother we have. She will adopt and care for almost any animal. When a doe is shown the baby that receives her milk as food, she will come to her place to be milked at the baby's cry. It is no uncommon thing among the less refined Spanish people of this country to turn baby and doe in the yard together, and the doe comes at the baby's cry and places herself in such a position that the baby can suckle her.

V. Goats milk is the nearest to the human. It is alkaline in reaction, sweet and practically inodorous. Casein and paracasein are formed slowly when treated with acids or rennet. The precipitate formed is loose and flocculent (not tough and compact like cow's milk under similar treatment.) The quantity of proteins is nearly the same and proportion of casein to albumen is about 4 to 2.5 (human 4 to 3, cow 6 to 1.) Like human milk it contains small amounts of lecithin and nuclein. The fat globules are small and the capsule easily dissolved. It is rich in lactose.

COMPARATIVE ANALYSIS.

		GOAT	HUMAN	COW
Water	85.6	87.3	87.5
Dry-substance	...	0.7	0.3	0.7
Casein	3.5	2.	3.5
Albumen	1.3	1.6	0.5
Fat	3.2	2.8	3.5
Lactose	5.7	6.	4.3

These analyses will vary from time to time in different species and according to period of lactation, food, etc.

Experience has shown that babies do better on milk taken *from does, that are confined to a clean, dry yard and fed upon dry, well-cured hay*, such as clover, alfalfa and natural grasses, together with one pint of oats or barley as grain twice a day. *No green feed of any kind*, especially carrots, turnips, beets, etc., should be allowed.

For very young babies it is well to select a doe about two weeks fresh, the milk for the first month being diluted with two parts of pure warm, boiled water (not distilled). After the first month the strength should be gradually increased, so at the fourth month it is given pure. Some infants will require stronger milk than others but it is easy to watch the stools and regulate the dilution by their appearance. If the stools are curdy, add more water. If white and pasty, allow milk to stand eight hours and skim off the cream. If acid, add lime water or odium citrate. If any intestinal trouble occurs, allow the goat no alfalfa or clover hay, but only hay made from grasses with her usual grain. Another thing, keep a lump of rock salt within easy reach of the goat, so she can get what she needs each day and not salt at intervals, for colic and diarrhoea are sure to follow these salting days.

Just a word in closing this paper, regarding milk and tuberculosis. In Bulletin No. 93, Bureau of Animal Industry, is to be found a very elaborate and worthy discussion on "The Relation of Tubercular Lesions to the Mode of Infection." This bulletin will prove to the fair mind the unreasonableness of the respiratory theory.

of tuberculosis, and the reasonableness of the theory of direct infection, from abrasions in either skin or mucous membrane by fresh tuberculous material. It is to be believed that the vast majority of cases of tubercular infection are due to the use of the food products of the tubercular cow. This statement is made in view of the following facts :

I. Cattle seem predisposed to tuberculosis, the percentage being from 35 to 51%.

II. That milk from tuberculous cattle is used more extensively than any other article of food, almost every person at some time in his life subsisting upon it.

III. Milk from a herd of cows in which one tubercular cow is kept will contain tubercle bacilli.

IV. Milk is almost entirely relied upon by physicians as a food for patients suffering from acute infectious diseases and fevers, especially when the temperature ranges the highest.

V. This continued, elevated and gradually declining temperature fills the space which makes it possible for the bovine bacillus to become acclimated to human soil.

How often have we heard the story, "Doctor, I had typhoid fever and tuberculosis set in ; or, I had la grippe, or pneumonia and my lungs did not clear up." We have all heard it many times, yet I doubt if most of us have given a possible thought, that the food might be the possible reason that the case didn't clear up. Suppose a case of typhoid fever, milk used as a food, the third week, ulcerated Peyer's patches, the digestive functions not properly performed. Now the milk containing tubercle bacilli comes in contact with abrasions in the mucous membrane, is absorbed and carried through the lymphatics and thoracic duct and emptied into left subclavian vein. It then goes to the right heart and thence to the lungs where it meets with the first set of capillaries. It is common in typhoid fever to have the capillaries engorged with blood, or plugged with clotted blood. Some of the infectious material is thus carried into what might be termed a dead end, with no immediate way of getting out. Phagocytes, ever active to remove foreign material, pounce upon it

and by virtue of the ameboid movement take it in. The poison of the bacilli kills the leucocyte and the bacilli are thus practically encapsulated and free from invasions of other leucocytes. The proper conditions for their acclimation are present, such as a temperature around 102 F., proper culture media, etc. In the course of a few days they begin to multiply and thus we have a deposit in the lung. The temperature now falls gradually, completing the conditions for the acclimation.

Bacteriologists will tell you that human and bovine bacilli are not the same, their cultural peculiarities are different, etc., but ask any of them from a pathological standpoint if there are any differences between a *tubercular lesion* in the *human, bovine or any other animal* tissues. They cannot answer in any other way but in the negative, for under the microscope a section of tubercular tissue has the same characteristic no matter from what animal it is taken.

I do not wish to be understood as claiming that no case of tuberculosis is due to respiratory infection by germ laden dust, for a small percentage of cases are contracted in this manner, but I do believe that sufficient data can be obtained to warrant the assertion that the vast majority of cases are caused from the use of food products from tubercular cattle. Already the movement against the use of cow's milk is gaining ground in the United States. Large herds of goats are being imported into California, Arizona, New Mexico and Texas. The department of agriculture has taken it up, and when the movement is started, backed by facts and a horrible fear of a dreadful disease, it is reasonable to predict that in the near future cow's milk will be shunned as a filthy food, and replaced by the milk of the most misunderstood, abused, cleanest and healthiest of animals, and the only natural foster mother of the human race.

21 East Pennington St., Tucson, Arizona.

—*Cleveland Medical and Surgical Reporter*.

THINGS WE SHOULD KNOW.

The doctor who prescribes without reward or at least a hope of one, usually makes a prescription that is not worth anything.

Pin worms may be destroyed by introducing a sulphur ointment within the Anus.

Powdered subsulphate of iron sprinkled upon a pledget of cotton and introduced within the nares will control the most obstinate case of epistaxis.

Cucurbit Pepo 1x, in ten-drop doses taken with an ounce of water, before meals, will relieve more cases of "morning sickness" than any other one remedy.

For the prevention of premature labour there is no remedy that can compare with Caulophyllum.

For in the time of trouble He shall hide me, in His pavillion ; in the secret of His tabernacle shall He hide me, He shall set me up upon a rock.—Bible.

The immediate repair of a lacerated cervix is an open question. The weight of opinion is overwhelmingly against such a procedure.—DE WITT G. WILCOX.

preventing speech. Dyspnœa so intense that he cannot bear a handkerchief before the face.

Urine scanty and suppressed. Soft, slow pulse, weak and small. Intense coldness and blueness of the surface with cold sweat. The violent cramps and spasms of Cuprum will distinguish it from Camphor, Verat., and Arg. Nitr. These cramps particularly affect the flexors, the muscles often drawing up into visible knots.—J. B. Bell.

Cuprum as we all notice from the symptoms, is a great spasmodic remedy. In cramps it is perhaps the best remedy. These cramps may be localized or general. The more violent the cramps, the more difficult is the case and the more easily and promptly will it yield to Cuprum if timely administered. We have used this remedy most extensively and have derived admirable results. I echo Hahnemann's opinion even to-day, as I have always found Cuprum yielding better results than Veratrum. Now there are different preparations of Cuprum that we have used and to some of which we are peculiarly partial, because they have yielded most excellent results in the hands of myself, my father Dr. P. C. Majumdar and my late grand father Dr. Behari La Bhaduri.

Cuprum Arsenicosum stands at the head of the list. Its action is most prompt and it has been the saviour of many a life in my hands. The late Dr. E. M. Hale first introduced this remedy.

It received quite an extensive use in the hands of late Dr. B. L. Bhaduri in cholera.

Dr. Hale records his experience thus :—"I first used in some severe cases of cholera which occurred in 1867 and 1876. These cases were marked by the usual intestinal disorder to which was added severe and painful cramps in the abdomen and extremities. The alternation of Arsenicum and Cuprum

did not prove as satisfactory as I expected, but the use of cupric arsenite in the 6x trituration in water for children, and dry on the tongue in adults generally acted promptly. I can recommend it in cholera infantum, spasmodic and neuralgic pain in the bowels accompanied by screams, and cramps' in the fingers and toes attended with great debility and threatened collapse. I have also used it with good effects in chorea dependent on a profound affection of the nervous centres, and presenting the wellknown characteristic symptoms of cuprum united to the dyscresia which always indicates Arsenic.

(*To be continued.*)

INDIRECT TRAUMATISM AS AN OCCASIONAL CAUSE OF CEREBRAL APOPLEXY.

BY JOHN E. WILSON, M. D.

NEW YORK CITY.

Cerebral apoplexy is such a common occurrence in the practice of all physicians that any of us would feel competent, with small time for consideration, to state the ordinary varieties and their causes. Cases sometimes occur, however, in which none of the usual conditions have preceded the attack, and where the etiological factor is left largely in the realm of theory, since the necessity of determining the extra etiology is too slight to force us into any very elaborate investigation. On the other hand, cases do occur where large interests depend upon such a decision, and in a recent medico-legal case, the paucity of exact knowledge of the effects of indirect traumatism was very strongly impressed upon my mind. The status of accepted medical opinion at the present time seems to be this. Cerebral apoplexy may be produced by direct injuries to the cranium which have such a degree of penetration that they lacerate or rupture the walls of the arteries, or veins of the meninges, of the dura,

compulsions, he will find it still harder to overcome the doubts, the fears and the scruples which underlie his worry."

ONE OF THE SILICEA SYMPTOMS.

It is now many years that I learnt a symptom of Silicea, the value of which I have had occasion to verify many a time. One day while driving out, we noticed that the horse was trying to defecate but was unable to do so. The stool would be partly expelled and will recede again. Dr Clarke said—"do you know, what that is a symptom of." On my answering in the negative he told me that it was a characteristic of Silicea. I will give this horse a dose of Silicea and it will get well.

Since then I have tried this remedy in man very often and with excellent results. Lilienthal mentions of this symptom under the head of constipation but does not give it much importance. H. C. Allen puts it in bold types "*stools when partly expelled recedes again*" (Thuja).

Of Thuja in this connection I do not know much. But there must be other Thuja symptoms to guide.

Only lately I had a case where all allopathic resources had failed. A large douche with four or five pints of water was the only resource. The patient despaired of recovery. He also tried Homeopathy,—took Graphites, Nux Vom., Sulphur, Alumina and many other drugs but all in vain. I selected Silicea. The leading key note was there. Of course there were other symptoms also. For two days it made no impression. As it was in the family of a rich man the patient's people began to be impatient. Even the attending physician requested me to change the remedy and try some other drug. But I had great faith in my Silicea. For the last two days he has had a normal healthy stool every morning without the

help of any other adjuvants, a thing that has not happened for many a day, in fact for two or three months. This patient is a constipated subject. But by regulating his diet and the occasional administration of a few doses of the indicated remedy I hope to cure him permanently. I used Silicea 30 in this case. I think the potency is as important as the drug in these cases.

J. N. MAJUMDAR, M.D.

FERRUM METALLICUM.

J. T. KENT, M.D.

A good many years ago, Dr. Lippe had a case in Philadelphia of a woman who had been in bed for twenty years. He cured her after all the prominent allopaths had failed; and the remedy was Ferrum. An allopath wanted to know what cured, and when Dr. Lippe told him, said, "Why, we gave her iron?" "Yes," said Lippe, "you gave her crowbars!"

In the old times any one suffering from anæmia was given iron. Great quantities in bulk were used. Every one who was bleeding, who had erysipelatous inflammation upon the skin, or who was chlorotic, was given iron. For the twenty years preceding the last five, there was what might be called an iron age. Cases of uterine hæmorrhage, nasal hæmorrhage, or the hæmorrhage constitution, long under treatment by the old school, have all had iron. Chlorotic cases, suppression of the menstrual flow, waxy skin, etc., again iron. Iron like Arsenic and Quinine, has been terribly abused. Permanent changes in the economy have been wrought by these metals. Especially our women wear the stamp of iron.

Provers, on beginning to take iron soon present an appearance of blooming health, that is really due to pseudo-

plethora. There is apparent fullness of the blood vessels, especially of those upon the surface, the face becomes turgescient, red and hot, and the extremities gradually become cold, stiff and numb. As a matter of fact, Ferrum produces a high degree of anemia, breaking down the red blood-corpuscles, producing weakness, flabbiness of the muscles, with redness of the skin, especially of the face, and engorgement of the capillaries.

There is a determination of blood to the surface from the slightest cause. The face is red in the pains, red in the chill, red in the sweat; so red, that you may write your name on it with your finger; such stasis, that a white streak following your finger will but slowly flush again. This engorgement of the capillaries of the face produces a puffiness that resembles true plethora, but which is really anaemia. Iron, as a matter of fact, is homœopathic to anaemia when its peculiar symptoms are present, but not necessarily homeopathic to all cases of anaemia because it produces it.

Ferrum produces a state much resembling that produced by Manganese, but is not attended by pseudo-plethora, nor is the face flushed red or seal brown in color.

After the breaking-down of the red blood corpuscles a sallow, pale appearance of the skin sets in, with a greenish or yellowish tinge, which is termed chlorosis. Ferrum produces almost complete chlorosis, associated with suppressed menses, with a watery flow or with a copious flow. There are ulcers on the lower extremities that do not heal, and pallor except during pain, excitement or chill.

It is a peculiar feature that although when the patient is quiet she has pale face and lips, during the first hint of pain, there comes the flush with the appearance of health. When the prover has a chill, the face is flushed and hot, while in chills the face is generally pale. In the chill of

Ferrum, there is thirst (like Ign.), and at no other time. Here we have at once stuck a mile post, something peculiar in a drug and in a sickness.

The constant redness of the face may be likened to that, found in many old whiskey drinkers, beer drinkers, etc., and it is often found associated with vertigo and enfeeblement. Pinch up the skin between the fingers, and it will blanch, but the redness will slowly return.

A peculiar condition that exists in combination with the bluish body and red face, is coldness of the feet and hands with burning of palms and soles. These guiding symptoms betray its similarity to Arsenicum. Arsenic, China, and Ferrum are markedly similar, and are antidotes to each other. Ferrum is an antidote to Arsenic. Ferrum is useful as an antidote to the abuse of Quinine, because it corresponds closely to the symptoms produced by Quinine, and is similar in its sphere of action.

Ferrum produces great weakness and vaso-motor paralysis. The skin pits pressure. Red spots appear on the skin and disappear on pressure. There is venous stasis (Carbo v.), dilated capillaries, and varicose veins. Paralysis of the capillaries is a prominent symptom. The face is covered with varicose capillaries; the same are on the thighs, and elsewhere stasis of the portal veins is found, with portending haemorrhoids, always bleeding.

In the state of coldness and oedema of the extremities there is a marked disorder of the stomach, with vomiting of food immediately after cutting it, a jerking regurgitation of food much like that produced by phosphorus; but phosphorus spits up food in mouthful tasting as when swallowed. There seems to be none of the proper fluid in the stomach to bring about the digestive changes. Fluids may remain a long time in the stomach and not be vomited, in Ferrum

patients, while solids are vomited at once. It is not easy to mistake the remedy finding flushed face, bodily coldness, coldness of hands and feet, anaemia, with constant return of solid food. These are roughly characteristic of Ferrum. Vomiting of bile, with always a bitter taste in the mouth. Great pain in the stomach. Vomiting followed by exhausting diarrhoea.

Old, long standing dyspepsias with nervous prostration, nervous trembling, sleepless nights, numbness of hands and feet. Burning of palms and soles, not with fever, but in common chronic diseases. (See Calc., Cham., Graph. Sil. Sulph.)

There is copious, exhausting diarrhoea with engorgement of the liver ; bloody discharge from the bowels ; venous haemorrhage. These alternate with constipation. Diarrhoea ; undigested fluid, painless, during a meal. The urging comes as soon as he puts anything into the stomach like Arsenic. China has the same but the stools in the night, as well.

Ferrum has troublesome uterine haemorrhages copious and exhausting. Menstruation lasts too long ; for days and weeks : It intermits, stops and begins anew. There is frequent haemorrhage during gestation. Bleeding from broken veins upon the lower extremities. The veins are greatly engorged, and friable ; they break and bleed. There are haemorrhages also from the nose. The nose is almost constantly filled with blood, when this is blown out there is haemorrhage. Bloody mucous discharges from the nose.

Ferrum has bleeding from the enlarged veins at the throat with hoarseness, bloody expectoration or green, yellow purulent discharges mixed now and then with blood.

The capillaries of the lungs are terrible. They easily break and bleed. Most distressing whooping cough in which mouthfuls of blood and white slime come up with a choking cough.

It corresponds in a general way with disorders tending to great emaciation with rapid wasting of tissues, consumptive disorders, etc. Given in the crude form in these conditions, it is one of the most dangerous of drugs ; it is not a medicine. It ~~should never be given except in the highest potencies, and without repetition.~~ In consumptive disorders it acts with great violence because of its destruction of venous tissue and blood disorganisation. Iron and the acids are much alike in that they predispose to hæmorrhage of the lungs. This is especially true of Acetic acid. The hæmorrhage of Ferrum is also produced by relaxation of the walls of the blood vessels, and is therefore useful in labor, but for reasons before stated should not be repeated. Ferrum is dangerous in emaciated and anaemic patients, as it will produce dropsy if repeated too frequently.

Ferrum produces a condition analogous to septicaemia ; chill with thirst and red face. Prescribed upon this striking condition alone it has cured septic, intermittent, and puerperal fevers. Such a puerperal fever occurring in the western valleys, will have a chill every other day, and sweat night and day ; with the chill there will be thirst and a red face. There is not a high degree of fever, only one or two degrees F., because the continued sweat keeps the body cool. First chill, then sweat. There is little heat with the sweat, but it is sometimes clammy and offensive, staining the linen yellow.

Ferrum is indicated in intermittents with the same symptoms. If there is pain, there is a red face during the pain. The feet cold, coldness extending to the knees, the hands are cold and the coldness extends to the elbows. The patient feels as if the feet were in snow water to the knees (Compare Sep.)

There is a peculiar relaxation of tissues seen in the

prolapsus of the vagina and rectum. This comes with the rigors in fevers. The prolapsed vagina is denuded and excoriated. It looks raw and inflamed, "like a piece of raw beef" says the nurse. So with the rectum, it is denuded and protruding.

In Ferrum we find a mental condition, with excitability which is a result of this terrible physical prostration. Anger with peculiar irritability. Anger when opposed. There seems to be a certain pride in always being the right, an objection to being found in the wrong, and they will listen to no argument or reason. Opposition gives rise to pettishness and irritability.

There is a decided characteristic in the vertigo of Ferrum. It is that of vertigo when going down the hill, as opposed to that of Calcarea, which comes on while going up the hill. It also comes on while crossing the water. When a Ferrum patient attempts a canoe ride, though the water is perfectly calm, he becomes so dizzy that he can hardly continue in the boat. He fears he will jump out, and that he cannot balance himself on the water. Sometimes the motion causes nausea. This is a general aggravation belonging on the whole drug.

A marked feature of Ferrum is the time of aggravation of which that from 3 to 5 A. M. is one of the most prominent. Ferrum has a cold sweat coming on from 3 to 4 A. M. which may last until noon, or until 4 P. M. cold sweat. Heat or hectic fever is worse later in the afternoon or evening like Phosphorus. Phosphorus has an intense hectic fever in the afternoon, hot skin, night sweat, constant burning, thirst for ice or cold water, red spot on cheek; diarrhoea; stool escapes during the cough; constriction of the chest; suffocation. You recognize this as the hectic in the last stages of consumption, and you may produce a comfortable ending, a perfect

enthusiasm, by the administration of one dose, high potency, not repeated. The dose may be followed by a gushing, involuntary diarrhœa, lasting a day or two, so offensive as to drive one out of the room, and leave the patient so low that it seems impossible for him to live. Usually, he will revive, and go down to death easily and comfortably in about six weeks. A stimulant given in such a state will increase the sufferings, and the fever cannot be relieved.

The usual remedies needed in this production of enthusiasm, are *Ars.*, *Carbo. v.*, *Lach.*, *Tar. Cub.*

The suffocation and inward distress in chest and stomach, streaming perspiration, great sinking, must have clothing away from neck, chest and abdomen, ghastly countenance and choking, call for *Lachesis*, and it may be given as often required ; but to give prompt relief, must not be given lower than the 200th potency.

To this picture if we add a cold sweat, with one on either side of bed fanning him, abdomen distended with flatus, cold breath, *Carbo v.* in water every six hours and then stopped, will give rest and beatitude.

But the time may come when these remedies will not avail. The ghastliness of the picture has not changed and to it we have added the pains of the dying cells, the death pains, the last agonies. Such pains come on at the beginning of mortification. If in the abdomen we may divert it by differentiating between *Arsenicum* and *Secale*, but if it comes in the last stage of consumptive disease, we are beyond those remedies. The pain, the rattling in the chest with no power to throw it off, the restless rolling and tossing, not able to be quiet in any position are covered best by *Tarantula Cubensis* ; this remedy goes farther, deeper, and in a different direction, than either of the remedies above mentioned.

The more marked the appearance of local hyperæmia in the Ferrum subject, the turgescence to the head, the greater the coldness, numbness and stiffness of the hands and feet. Redness is not always attended with heat, as in Aconite and Belladonna, but is a determination of blood to the surface, giving a color that is characteristic of Ferrum. It also belongs to that class of patients called cold, like Calc., Sil., Sep., Lyc., Op., etc. Opium is both hot and cold. It produces the desire to throw off the covering in its first effects, but later it is cold. An opium eater is always chilly when the opium is wearing off.

Ferrum has rheumatism in the deltoid beginning in the shoulder and going down the arm like Sanguinaria. Colch. and Ferrum have pinching tearing pains in right deltoid with an inability to raise the arm. Ferrum has many rheumatic pains in chest and shoulders, worse from attempting to lift the arm, from contracting the muscle, better from heat, worse from weight of bed clothes. It cures pointing in horses. There is an irresistible desire to bend the arm. The pain drives him out of bed at 2. A. M. He is better from walking slowly about. Veratrum and Mercury have rheumatic pains, driving out of bed in the night.

Headaches are throbbing and the patient is likely to waken with them at 3. A. M. lying awake the rest of the night. The pains are occipital with sensation of hammering. The chill comes on with throbbing pain in the back of the head. Pain in the back of the head when coughing, is a Ferrum key note. Carbo veg. has pain in the back of the head on coughing, but it has not the red face. Hot flashes with surging of blood to the head.

In the female sexual organs we find many prominent features. Menses profuse and hæmorrhagic, or pale and scant. Prolapsus of the vagina, dryness of the vagina,

numbness with lack of sensation in the vagina during coition. Loss of consciousness during coition, (Angar). Ferrum also has great painfulness during coition. Sep., Kreos., Plat. and Sulph. have great painfulness during coition because of the increased sensitiveness of the vagina. Fer. ph. has the same symptom with spasm of the vagina caused by increased sensitiveness. When making a digital examination it is almost impossible to pass into the vagina because of the extreme dry and parched condition of the membranes. You may find prolapsus of vagina in cases of former poisoning by Ferrum. Finding prolapsus of the vaginal walls, we usually think of Sep., Kreos., Merc. and Nux

A case of secondary or tertiary syphilis, given Ferrum, becomes rapidly worse in condition, and the ulcerations become phagadenic.

Speaking of aggravations, we find in the study of drugs, many modalities, which were applicable to the drug as a whole, and many that are only applicable under certain conditions,

Under Pulsatilla we found all discharges bland except the leucorrhœa to be the characteristic, yet Pulsatilla has bland leucorrhœa.

In Arsenicum the complaints of the body are better from heat, and the headache better from cold. That is characteristic, but Arsenicum has a headache that is better from heat. It is the exception, the alternate action described by Hahnemann.

Bryonia is worse from motion, yet it has lumbar pains that are better from motion.

Rhus in its general state is better from motion; yet it has lumbar pains, and pains in connection with the spinal column, that are better from rest, almost the opposite condition.

It is a fault to leave out these exceptions in the *materia medica* or take it for granted that because a remedy has several symptoms aggravated by peculiar conditions and circumstances, that this is a general aggravation of the remedy. It is not true. Lippe says the pains of Camphor are made worse from cold, which is true, but Cowperthwaite says aggravations from cold, leaving you to infer that this aggravation belongs to the remedy in general. As a matter of fact with Camphor, the early bowel symptoms associated with cholera are better from cold, and the patient cannot be covered; while with pains and bladder tenesmus he must be covered, and have heat applied. During the chill Ferrum has thirst, and during the heat it is thirstless; therefore thirst and thirstlessness have their own proper places.

Acetic acid is thirsty when there is no fever, and with fever it is thirstless. In dropsies with profuse urination it has marked thirst, yet in the fever it is thirstless. In pseudo membranous croup, without fever, there is marked thirst. One man cures the sick with our *Materia Medica*, and another wants it revised to suit his own meagre insight.

The Iodide of iron has the general iron constitution, and somewhat of the iodide constitution. It has an immense amount of pelvic infiltration with bleeding and uterine congestion. Extreme soreness and consciousness of the uterus.

Whenever the patient sits down, she sits down upon a pain where the uterus is. The pain pushes up out of the way. Such a uterus is sensitive to touch, through the abdominal walls, or through the vagina. The vagina is thickened and bleeds easily. The uterus is indurated and sensitive, Carbo an. has great sensitiveness of the cervix and of the *cœccyx*, with burning after touch.

The Phosphate of iron has been used by Schussler. It

is called "Schussler's Aconite," because it has been used by him as Aconite has been by some homœopaths, that is, given for fever. It has the Ferrum flush and varicose veins. There is most intense thirst during fevers, violent congestive headaches, worse from heat, better by pressure, with flushed face. It has not the fear of Aconite, not the aggravation from motion of Bryonia, nor the amelioration from motion of Rhus. The fever is of an ordinary type.

In nondescript coryzas with flushing of the face, look for the Ferrum condition. Pain in the back; congestive headaches with great throbbing. When patients are subject to little fevers when they take cold, think of Fer. Ph. The sole duty of the physician is to restore sick people to health, says Hahnemann. In the study of our vast Materia Medica we see the likeness of sick people. He who sees the deepest, will best cure the sick. The deepest insight comes to the man who thinks into the Materia Medica the hardest, and grumbles about it the least. It is a thing of beauty, and to him who knows how to use it, joy for ever.

S. L. G. L.

Medical Advance.

A FEW CASES FROM PRACTICE.

I.

A young plethoric and fat gentleman had an attack of fever of a high type a few days ago. The father is a staunch and faithful homeopath. I visited the patient on the second day of fever.

Face flushed, throbbing headache. Temperature 105. Great restlessness, panting for breath, considerable thirst and some drowsiness. There was chilliness in the morning

but burning heat in the evening. Belladon 200 two doses at the interval of six hours, followed by Placebo powders at the same interval.

In the next morning fever was less, headache reduced in strength, temperature 101 F. There was some rest, tongue coated white, no stools but frequent micturitions.

Placebo powders every six hours. Fever came on at noon with very high temperature ; at first it was 105 but subsequently 106.4. Complete drowsiness alternating with restlessness, fierce headache. Vomiting of bile after drinking water. Tongue coated, no stools, urine frequent.

One dose of Arsenic 200 when the fever was abating.

In the morning the temperature was normal, profuse perspiration, headache entirely ceased, no restlessness but slight thirst and tendency to vomiting.

Placebo one powder every six hours.

Fever came on again at 2 P. M. with slight chill. Temperature 103 F. Burning was great and considerable thirst. Had one stool after the paroxysm, tongue cleaner. In the evening the fever abated and in the next morning it was normal. Every one in the family urged to give big doses of quinine.

I gave a dose of Arsenic C. M.

No more fever from the next day. Patient's father requested me to give some tonics and I gave the best tonic Placebo.

II.

A robust young girl, aged 15, very much addicted to study and preparing for her examination, came under my treatment for a very severe form of headache.

It was a migraine, the right side of the forehead and eye were affected. Pain used to come on at noon, increased in

height in the afternoon and gradually ceased in the evening. She cried out with the severity of pain.

There was slight nausea. Slight pressure caused some relief and cold water application ameliorated.

Worse by the light and cold water and also by mental exertion.

I gave her a dose of Spigelia 30 in the morning and another at noon.

No effect in the afternoon and at 3 P. M. it was unbearable. Eye became red and integument over the brow œdematous.

Spigelia 200 one dose had no effect. Pain ceased as usual at night but on the next morning at about 8 A. M. pain commenced with great severity. There was nausea and photophobia present.

Belladonna 200 had no effect, and about 3 P. M. pain was in its height and the girl was crying with excruciating pain.

Sanguinaria 6x one dose quieted her down and she slept till evening. Next morning pain was about to come when I gave her another dose of the same medicine and it subsided at once. The action of sanguinaria was so charming that the girl was frantic with joy.

There was no more pain since that time and no more medicine needed.

III.

Babu Rampada Nath, aged 42, always robust but now much emaciated, came to me on the 13th December, 1905, with enlargement of the parotid gland on the right side.

The swelling was hard and painful about the size of a hen's egg. It was moveable. General constitution was very good, no venereal disease of any kind.

Digestion bad, stools were generally thin, containing undigested food. Much salivation. Merc. sol. was given by another Doctor with partial relief.

Now the pains subsided and the swelling was less. No more improvement for one month.

I gave him Iodine 30, one powder every morning.

After taking the medicine for eight days he was relieved of his diarrhœa and his digestion improved.

The swelling almost the same. He felt better in general health, he said. I gave him no medicine for one week ; after that I continued the same for another week.

In short by using Iodine in this way he got rid of his glandular swelling and he gained flesh after six months. This is a remarkable cure as declared by his allopathic Doctor who treated the case before. He advised the patient for a speedy operation.

P. C. MAJUMDAR, M. D.

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—*Cleveland Medical and Surgical Reporter.*

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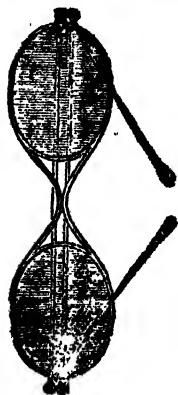
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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

Vol. XVII.] NOVEMBER 15, 1908. [No. 11.

CHOLERA INFANTUM : ITS TREATMENT.

A. GRACE WHITE, M. D., BRADFORD, PA.

During the months of June, July and August the physician residing in the city is called upon to treat more cases of Cholera Infantum than any other disease peculiar to childhood. It may be both expedient and profitable to look over some points in treatment.

Cholera Infantum is a gastro-intestinal infection of great virulence in which symptoms are of rapid onset and grave character, clinically resembling Asiatic cholera. The symptoms are the result of the absorption of toxins which may have been present in the milk prior to ingestion. Thus it is an acute milk infection.

The Breast-fed infant is the least likely to be attacked by this disease. However should the symptoms of cholera infantum be present we find as a rule that the breast-fed child has a greater resistance to onslaughts of the disease than the one artificially fed. So our dietetic regulations will

be those which apply to the bottle fed baby, as our experience has been mostly with children thus reared.

The first consideration is the milk supply. It should be the purest available. Certified milk will usually meet that requirement. If vomiting be a symptom, but not persistent, the milk should be diluted to one half the usual strength, using boiled water that has been cooled in a clean open jar. Cold boiled water should be administered freely between feedings, especially if the temperature is 103° or above. A great many children suffer from the want of pure cold water. Should the vomiting be very persistent, milk should be withheld entirely, and egg albumin given in its place. Take the white of an egg, mix with it two tablespoonfulls of pure water, add a pinch of salt, and mix with a fork, not beating but "Stringing" it. This should be given every two hours night and day. I prefer this to arrow-root or barley water. Crust coffee seems to help relieve the nausea.

The child should be placed in a cool airy room on a hair mattress or hair pillow. Keep the hands and feet warm, wrapping the patient in a flannel blanket with a hot water bottle at the feet. Bathe in tepid water every two hours when the temperature is 103° or above. The bath should last ten to twenty minutes, and the water cooled gradually from 90° to 75°.

The temperature is best controlled in this way. For three days in succession at the beginning of the treatment administer a teaspoonful of castor oil. Use at the same time the high colon enema of normal salt solution. Continue the enemas once or twice each day until the temperature becomes normal.

When the patient is seen early in the disease, Aconite is the remedy if there is the characteristic restlessness and high fever with green mucus in the stool. Usually this

stage has been passed, and Chamomilla is indicated with its green stools looking like spinach and chopped egg ; the child is fretful, has one cheek red, the other pale, and wants to be carried. However Veratrum album and Arsenicum are the most often indicated. Veratrum album has vomiting and purging. Purging is the more prominent, while motion aggravates all the symptoms. There is less prostration and less thirst with veratrum than with Arsenicum, also less restlessness, but usually more pain. When any doubt exists between these two remedies veratrum should be used early in the case, for when Arsenicum symptoms appear, the patient has passed into a state of great exhaustion from which it is hard to recall him.

One very important point in treatment of cholera infantum is the removal of the child from the heated city to the country or the sea shore or mountains. Pure fresh air is a necessity.

BY HUDSON D. BISHOP, M. D., CLEVELAND, O.

The first basic principle in the treatment of the various forms of acute gastro-enteritis is to fully recognize the fact that the disease is due to an infection, the source of which is the milk supply in bottle-fed babies and faulty technic in nursing in breast-fed babies. The severity of the case depends, of course, upon the intensity of the infection and also upon the condition and resistance of the child. The latter is the second basic principle and is by far the most important of the two. It is rare that a perfectly healthy child succumbs to even a very severe infection. The cases that result fatally are the ones whose resisting power has been lowered by faulty digestion for some time prior to the acute intestinal intoxication.

My treatment of such cases consists first of a thorough

cleansing of the intestinal tract, giving merc. dulcis ℥x . two tablets every half hour until ten have been given, following this in two hours after the last dose with from one to two teaspoonfulls of castor oil. If the constitutional symptoms are marked I use a hot body-pack with Aconite internally until free perspiration is induced and the temperature is lowered. If the temperature continues high inspite of this treatment I use a cold body pack with friction at a temperature of five degrees less than the child's temperature every two hours as long as the temperature is above 102° F . This form of hydrotherapy, I believe, is far better in its results than tub or sponge baths. I do not use colonic irrigations of salt solution unless there is constant urging to stool. I then use a return-flow rectal tube. With this, if the hips are elevated the entire colon can be flushed without causing involuntary expulsion. I have used an absorption enema with good results in cases where there had been such a loss of fluid from the body as to threaten collapse. I never wash out the stomach unless there is vomiting. In some cases the procedure is the first one that is indicated.

Dietetic treatment should not be instituted until the stomach and intestinal tract have been freed of offending matter. Milk of whatever kind must be withheld at least for twenty-four hours. In its place I usually give a cereal gruel, partially or completely dextrinized. It is best given cold, especially if there has been vomiting. The quantity should be small at first, not more than one ounce, and if this is tolerated, the amount is increased up to one half the amount suitable to the age. Frequent feeding with small quantities is the rule. In returning to the milk diet, I begin by adding a whey mixture in increasing amounts to the cereal gruel, beginning with half ounce. When the amount reaches one half the total feeding, I begin 8 or 16 ounce top-milk,

starting with half an ounce and lessening the whey by the same amount. The secret of success in the return to the milk diet is to feel your way. If a mistake in judgment is made and the stools show imperfect digestion I always give a full dose of castor oil to get rid of the undigested matter and start over again.

I am frank in saying that I seldom use medication, other than an outlined above. The exceptions are in the cases where I get marked indications for such remedies as *veratrum alb*, *calc phos.*, *chamomilla*, *aethusa* or *bryonia*.

BY H. ELLEN WALKER, M. D. SARON, P. A.

In the treatment of Cholera Infantum, the hygienic and dietetic conditions are of the greatest importance. It is true that the properly fed and properly clothed child, kept lean, with correct ventilation of sleeping apartments, not exposed to the extreme heat of the sun, rarely has cholera infantum.

As far as possible a child should not be weaned until after the second summer. If some additional food is needed, use only pure clean milk, for neither Pasteurization nor sterilization is sufficient to purify injected milk. The mother or nurse, the baby, the bottles, the nipples, the milk, the milkman, and the cow must be kept clean. Sufficient micro-organisms could be found on one milkman to kill all the infants on his route. Mothers milk, if healthy, is without question the best food. A healthy wet nurse may be substituted for the mother. If these are not to be had, cow's milk modified to suit the case is the best. Most cases of cholera infantum are found in artificially fed infants. In the hot months, the milk though certified to be pure, should be sterilized, and no error allowed at any point in the process of preparation of the bottle. The bottles and nipples should be boiled every day and

filled with hot soda water as soon as emptied, and thoroughly rinsed in boiled water before using again. If the maternal nipple is sore and fissured it is as much a point to be guarded as infected milk and should be protected by a nipple shield or the milk pumped from the breast and fed with a spoon. The nipple should always be cleansed before feeding with sterile water and after feeding with boracic acid solution. A soft flannel garment of light weight worn next to the skin should never be omitted to protect the child from sudden changes in temperature. The quantity and quality and time of feeding must be strictly guarded. As a rule infants cannot take in very hot weather the same amount of fat and proteids, but they get thirsty and should have between feeding times at least once or twice a day two ounces of sterile water not too cold.

Acute indigestion by over-feeding or meals at all hours, is often promptly relieved by a few doses of *Nux vomica* and warm enemata of boiled water. Flushing the colon thoroughly is a good thing in beginning of every case and this with regulation of the diet has aborted many cases. After the invasion of the disease, all food must be stopped, and if equipped to "agree with thine adversary quickly" with the indicated remedy, the little patient will be convalescing in twenty-four hours. When the fever is high, sponge the child in tepid water every two or three hours, increasing the time between the baths as the fever diminishes and flush the colon with two to four ounces of sterile water in which is dissolved a teaspoonful of powdered Borax. If the child be in a state of collapse with a low temperature, then artificial heat must be applied. When pain is severe and the child moaning with every breath, antiphlogistin as a poultice over the bowels relieves promptly, especially if there be fever. In the stage of collapse antiphlogistin is not indicated but com-

presses saturated with hot whisky changed often, with a small hot water bottle over the compress, hot water bottle at the feet and between the thighs, and hot saline solution injected into the bowel are to be used as stimulants.

Extreme cases of collapse may require active stimulation; camphor given hypodermically where the collapse occurs early in the disease; brandy—or a better stimulant is “Benedictine” a German brandy made of spices—a few drops in sterile water. All remedies act more promptly if given in hot water.

Verat. alb is the remedy where there is vomiting and purging, severe colic; watery green stools and cold sweat.

Ars. alb. has great prostration; thirst with vomiting after the least bit of cold water; restlessness; no sweat; cold pale face; skin dried and shriveled.

Ipecac, early in the attack where nausea is great and continuous; vomiting more pronounced than the bowel disturbance; stool green, with an odor of fermentation.

Belladonna; has fever; red face; hot skin; drowsiness; sudden starting in sleep; stools, green mucus and bloody.

Calc. Carb; stools sour, light in color; sour vomiting; wrinkled face; sweat on the head during sleep during dentition.

Calc. phos.; the child looks old; this makes a good tonic during the disease and in convalescence where there is history of tardy dentition in a undeveloped child.

Merc. cor; stools green, slimy, bloody; much pain and tenesmus.

Apis is a sure remedy where urine is suppressed, with a hot head and shrill cry; where cerebral symptoms are beginning.

When feeding is resumed it must be commenced with the utmost care, rice water, or barley water, with a little bit

of sweet cream may agree. Imperial grannum or farena gruel well corked and largely diluted with water is a good, nutritious diet if it suits the case. Some children crave animal food and in such cases raw meat juice, properly heated and seasoned, will be eagerly taken; for older children raw scraped beef is often well taken, and whipped cream may be used occasionally with advantage. A daily bath in olive oil, plenty of fresh air, and a change from the city to the country or the seashore will greatly aid in the recovery.

BY GAIUS J. JONES. M. D. CLEVELAND, OHIO.

For one reason or another, although doing as much business as ever, I do not treat as many cases of this disease as formerly. The first ten years of my professional life was spent in the country, and during that time, and for many years after I came to the city, I treated a large number of cases each summer. During the summer of 1878, we had a very severe epidemic, of cholera infantum in this city and although the city was not more than quartar of its present size it had more deaths during one month, and chiefly from diseases of this character, than we have had during any month since that time. One hundred and twenty children under one year of age died in one week.

This is a disease which is very much dreaded by every community in which it has prevailed to any extent. I have noticed that, during the prevalence of such epidemics we have had large number of cases of other diseases of the allmentary canal, so that we were called upon to treat every character of such derangement. It is not thoroughly proven that it is contagious, according to our best authorities, but it seems to me that it has every characteristic of a contagious disease. It has prevailed here to a greater extent in the suburbes and during the time referred to above, I noticed that

there were more cases of it in portions of the town or suburb where well water was used.

The symptoms of this disease are well known, but no physician who has treated many cases of it can forget the pallid countenance, the pinched expression of the face, the coldness of the nose, cheeks and forehead, the fixed and almost glassy appearance of the eyes, dull and lustreless. Sometimes a change would come over a child in a single night and it would lose a considerable portion of its weight in a very short time.

The stools, which are characteristic of this disease, are profuse and watery, containing little flakes resembling grains of rice, which have given them the name of "Rice water." A large portion of the fluids of the body is carried off in a short time, so much that many of the cases never rally from the first attack.

In reference to the management of the cases the diet is exceedingly important. Nursing children are less liable to be attacked than those fed otherwise, but in a few cases I have found it necessary to wean the child as milk in any form could not be digested. Among the articles of food which I have used I have found that those prepared from wheat are the best. Imperial Granum, Ridge's prepared food, and of late a gruel made from cream of wheat have been my favorite articles. Another good food is the flour ball, which is made by placing a quantity of dry wheat flour in a sack, placing the sack in a kettle of cold water, the kettle put on the stove and the water brought to a boiling point and kept there three or four hours ; then this flour, which has been cooked thoroughly, is dried by a slow fire until it becomes extremely hard, when it can be shaved off and easily changed into a fine powder. With this powder, as in the case of the other preparations referred to, a thin gruel can be prepared, seasoned with a little

salt and sugar and fed to the child regularly. Some cases are so extremely sick that they can hardly be fed more than two or three teaspoonfuls at a time once an hour, the quantity being increased gradually, until three or four ounces are taken every three or four hours. As the child improves a little cream can be added to this gruel, and later a small portion possibly 25 percent, of fresh cow's milk can be given with the gruel. The quantity of milk can be gradually increased, but as soon as the curds of milk are noticed in the stool, showing that it is not digested, we must go back to the original feeding. If water is given at all it must not be given too cold. Cold water can be given in most cases by the teaspoonful, and the medicine should always be given in liquid form, unless the child is constantly nauseated.

Cases that are properly treated when first attacked with indigestion or diarrhoea, provided the diet is changed to something suitable, rarely have this disease, and it is those cases that have been sick for weeks or months that are most liable to be attacked suddenly, with often fatal results. During such a season all children should be watched carefully and the moment any deviation from health is noticed it should be corrected, as cholera infantum is a disease which should be prevented as well as cured. Children during such seasons should not be allowed to over-exercise or become chilled at any time, especially at night. No new or strange articles of food should be allowed. They should be kept in the shade and protected from draughts of air. They should not be allowed to become excited. Carriage riding, when the child can be protected from the sun, is one of the best modes of preventing the disease.

With regard to the medicine very much can be done with the indicated remedy. Quite frequently children will be attacked with fever from some unknown cause, the skin being dry

and the child restless and irritable. Here a few doses of Aconite given hourly will modify the condition very materially. I would not continue this remedy more than 48 hours at any time, but during the course of a long continued illness such attacks may become frequent, when this remedy may be given for 24 hours, until the fever subsides, instead of the other remedy which has been prescribed. And then the remedy which seemed more indicated for the other symptoms may be again prescribed. Belladonna 3x is a remedy of great importance and frequently of more value than aconite in cases of fever. In any case where the child is listless and dull, with great heat about the head and full pulse, it should be chosen in preference to aconite ; the main difference would be the tendency to stupor, while in the aconite case the child would be extremely restless. I have been called many a time to visit a case where aconite had been prescribed by the mother or nurse, and had failed to relieve, such a child being dull and listless, inclined to stupor, with possibly some tendency to convulsions. Almost invariably in cases of this kind Belladonna would relieve in a short time. Chamomilla 3x is often indicated in the nervous, restless case, the child having a desire to be carried about from place to place, which exercise seemed to relieve it. There is great irritability, frequent redness of the cheeks or one cheek only, with irregular fever and very little perspiration. Croton. Tig., which should never be given lower than sixth dilution, is indicated where there is sudden urging to stool after taking the least quantity of food, the child drawing up its limbs, and relieved by gentle pressure over the abdomen. Heat applied to the abdomen will relieve it also. Colocynth has many symptoms in common with Croton, but there is much more colic than diarrhoea, pain coming on suddenly, and being relieved as the pains of Croton are. Aloes has a profuse

watery diarrhoea, aggravated in the forepart of the day and accompanied by a great amount of gas in the intestines. The stools are quite sudden and often nearly colorless. Podophyllum resembles very closely aloes in its indications. It has its aggravation later in the day than aloes. There is occasionally a great tenesmus, with prolapsus ani. This is a symptom which is not common to other remedies, and I think no remedy will cure more cases of prolapsus ani in children than Podophyllum. Veratrum album : This remedy has many of the cholera symptoms. It is indicated for the coldness in the extremities, the nausea and the profuse rice water stool.

I have used Aconite in the 3x dilution ; Belladonna generally in the 3x but often in the 30x ; I have rarely used Chamomilla lower than 30x ; Croton. tig. generally in the 6x, sometimes higher ; Colocynth sometimes in the 3x but generally in the 30x ; Podophyllum teaspoonful doses of a solution made by dissolving 10 grains of the 3x trituration in 31V of water, occasionally the 30th ; Veratrum album in the 3x to 30x.

—*Cleveland Medical and Surgical Reporter.*

SELECTIONS.

Echinacea : A Drug Physiognomy—Characteristics : "Blood poisoning." Septicemia. Aggravation, nocturnal ; amelioration, when recumbent.

Nervous system : Profound adynamia. Prostration. Mental depression. Delirium. Dullness of comprehension. Vertigo. Dreams. Nightmare.

Pains in general : Sharp, sometimes lancinating ; oftener, deep, dull with sensation of exhaustion. In the head :

sharp pains with periodic congestion of blood to face and neck. In the chest; sensation of great weight upon thorax and sternum. Deep pains in the pectoral muscles (*aristolochia*).

Digestive apparatus : Mouth dry, gums bleeding easily, the lips and commissures of the mouth dry and cracked. Chancre. Gangrene.

The tongue is dry, thick, coated, whitish with red edges.

Gangrenous angina, tonsils livid or black ; a gray pseudo-membrane extends into the naso-pharynx and air-passages ; with fetid discharge from the nose.

Sour eructations ; pyrosis, nausea, sensation of fulness in the abdomen distended with gas.

Circulatory apparatus : Exaggerated cardiac action. Tachycardia with anxiety, anguish.

Fever: Chills with nausea. Sensation of coldness in the back.

Genital tract : Puerperal septicemia ; suppression of the lochia ; abdominal sensitivity, with tympanites.

Skin : Recurring furuncles. Anthrax. The bad effects of insect bites or vegetable poisons. Lymphangitis and ganglionar adenopathy.

Comparisons : Arsenic, Baptisia, Cistus, Hepar, Lachesis, Rhus.

Echinacea is one of the chief remedies in "blood poisoning." Its role is extensive. While it permits the organism weakened by infection by pyemia to rouse itself and develop new powers against the invading septicemia, it acts locally as an antiseptic of the first order. Its local properties are analogous to those of the bichloride of mercury or hydrogen peroxide ; its general action is similar to that of the mercuries and iodides so commonly employed, so that it suits malignant affections and the varied forms of septicemia, whether they may be primitive, and hence traumatic, or spontaneous (cryptogætic,

as Leube expresses it) or consecutive (secondary bacteremia). The origin of the septicemia is of lesser importance ; if we are facing either a true septicemia without a special localization or an actual pyemia with suppurative foci, echinacea will often be the remedy of election, provided that the morbid symptoms are matched by those of the pathogenesis.

Echinacea is used in typhoid states with red, dry, ulcerated tongue ; gums bleeding and ulcerated ; mental troubles ; tympanites ; diarrhoea ; putrid discharges ; profound prostration ;—consequently, in grave typhoid, pneumo-typhoid, grippe, cerebro-spinal meningitis (with profound adynamia), diphtheria (gangrenous and nasal), scarlatina (noma and buboes). Its employment is no less successful in benign pyemias or in localized troubles ; furuncles, anthrax, abscess, recent or chronic ulceration. Echinacea suits also the treatment of that curious affection, more common than is believed, and often observed in the young, viz., staphylococci developing into numerous pustules (pustules de colle) scattered about on the cutis.

Finally, echinacea has a remarkable and incontestable action upon the vermiform appendix. It is almost specific in abdominal inflammation, puerperal infection, septic purulent foci in the pelvic viscera, and not infrequently wards off surgical intervention. It is of great aid in convalescence, favoring the elimination of pus and preventing secondary septicemic accidents.

Knowing its principal indications, we apply it in two ways ; internally in the 3x to the 6 cent. it produces excellent results, especially if the doses are frequent. Locally it may be used in lotion or lavage. Compresses wet with the 1x, applied to old cancerous ulceration of the skin, breast, cervix, will cause the disappearance of fetidity. Frequent lavage with gtt. XX of the 1x in a pint of hot boiled water will

rapidly diminish putrid vaginal discharges (puerperal septicemia), and may be used as a gargle in malignant diphtheria.

The wide range of echinacea and its remarkable action collocate it with calendula (local suppurations) and with hepar of which it seems to be a wonderful complement. Dr. Leon Vannier. *Revue Hom. Francaise*.

Echinacea—This is a remedy wherever you find a depraved condition of the blood in any disease, and one might say a specific antidote to all diseases of blood poisoning, whether showing a great or small amount of cell destruction; as well as being a powerful antidote to snake bites and poisonous insects. It is indicated where there is a tendency to gangrenous states, with sloughing in the soft tissues. In fevers it exercises a direct influence upon the system, by equalizing the circulation. It is an intestinal antiseptic, as shown by its destructive influence upon the pernicious germs as soon as administered. It is a nerve stimulant; that is, when the condition is due to a depraved state of the blood. But when all is said, we find it is indicated in any disease where the change may be manifested in a disturbed balance of the fluids of the body, resulting in cell destruction; changes, whether they be septic or otherwise, seem to find their master in echinacea angustifolium.

By keeping the action of the remedy in your minds, and following me closely, you can readily see where I have been successful in its use, as all the conditions that I shall refer to are from the use of the remedy in my daily practice.

In sore throat, diphtheria, tonsillitis, quinsy, glossitis, and laryngitis you will find wherever you have the dark blue or purplish condition of the membranes, showing the low state of the blood, that the remedy is indicated. The drug seems to exert a decided influence over catarrhal conditions of the

stomach and intestines ; in gastritis, fermentative dyspepsia, ulcerative stomatitis, intestinal indigestion, and duodenal catarrh. In these conditions you must not be afraid to give the remedy too often, for your best results will come from one-half to one dram doses, given every three or four hours, in water.

Echinacea is a remedy that should not be forgotten in fevers. My experience has been such that I can lay claim to the wonderful results that some claim for it in febrile conditions. In measles, chickenpox, and scarlet fever it seems to exert a powerful influence, and leave no bad after-effects. If you give echinacea angustifolium in scarlet fever you should never fear having it complicated with nephritis or any other complication.

Many physicians claim more for the remedy in malarial fever than others, and I can only say this about the remedy. I have used it in twenty cases without one failure ; the disease would soon be under the control of the drug, the chills would not return after several days' use of the drug, and the patients could return to work as if they never had been ill. If the remedy is continued several weeks after the fever is broken up, they will have no return of the trouble, as the remedy seems to entirely rid the blood of the malaria plasmodia. I have watched the blood very closely while giving the remedy, and have found that the red and white blood corpuscles increase in number, and the blood gradually becoming free from the plasmodium.

In typhoid or typho-malarial fever you will get excellent results from echinacea. When you have a great deal of adynamia present the results obtained are very pleasing, as it seems to exert a powerful influence over the condition ; the pulse becomes slower and stronger ; the temperature lower and the patient decidedly stronger. In these conditions it

will be 'necessary' for you to be able to differentiate its specific action from that of Baptisia and Rhus tox. Baptisia and Echinacea have almost the same action or specific indication. You can tell when to give Rhus tox., in preference to it, in that Rhus tox. has the dry, red, smooth and red triangular tip tongue, while that of Echinacea is dark brown, purplish, or even black.

Baptisia has not so great an amount of adynamia present as Echinacea, but the tongue and other indications are about the same.

In septicemia you will find that it is a remedy that you can rely upon, and it does not seem to make any difference as to the cause of the infection—the effect is the same.

The remedy is of great service in skin disease, locally as well as internally. It seems to act in any form of eczematous condition, but especially in the moist forms, with glutinous exudations associated with asthenic condition of the system.

In acne, especially where associated with indigestion, boils, carbuncles, pus cavities, chancroids, chancres, old sores, bed sores, and erysipelas or any ulceration, where you find the low state of the system, this drug is very useful. In these conditions when treated with this remedy, they soon disappear, and you do not have a return of them, when you continue the remedy long enough to clean the blood of the poison. Dr. O. L. Massinger. *Eclectic Review*.

—*The North American Journal of Homeopathy.*

THERAPEUTIC NOTES.

Nasal polypus :—Calc. Carb is very useful in this disease, especially, when the patient suffers very frequently from cold and catarrh, and if the growth is a furious one.

Staphysagria is also a good remedy in this disease.

Stitching and itching in the nostril, constant sneezing and coryza. In scrofulous and weak patient it is of much value.

Sanguinaria can.—Polypus of left nostril, soft and spongy tumor, sorethroat and headache, watery and acrid discharge from the nose, smell and taste lost. Bleeding from the nose.

Thuja :—Polypi in nose, hard and thick growth, often bleeding, ulceration half an inch within, where there is a scab. We have used *Thuja* successfully in many cases with benefit.

Teucreum,—Dr. Allen says : Polypus in the nose with all the symptoms which would naturally accompany such a tumor, obstruction, catarrh, pain in the forehead and nose etc. numerous cases have been reported cured. We have good results from it. Sometimes mother tincture has been used externally.

Pain in *Tendo Achillis* is sometimes a very distressing complaint and generally eludes the busy search after similitum. We have successfully treated a case with *Ledum Pal. high.* *Rhus Tox* and *Bryonia* are indicated in many cases but they failed utterly in our hand.

Perfect rest is required. Sometimes we are obliged to put the foot in splints and bandage.

Spasm of the diaphragm is what is generally known as hiccough. It is often very obstinate. When associated with hysteria, *Moschus* is a very efficient remedy. Among other useful remedies we may mention *Nux Vom.*, *Ignatia*, *Cicuta*, *Belladon.*, *Hyocyamus*, *Veratrum Alb.*, *Arsenic* and *Pulsat.*

If it is a symptom of some organic disorder of the stomach and intestine, it is obstinate and generally fatal.

P. C. MAJUMDAR, M. D.

HODGKIN'S DISEASE.

Hodgkin's Disease consists in the enlargement and hypertrophy of the lymphatic glands. It is a simple and at the same time a dangerous disease. We have some experience with it and so we are going to write something about it.

In the beginning it appears as a simple enlargement of the lymphatic glands but further development shows its serious nature.

Its causes are often obscure but constitutional causes are generally present.

It is a disease characterized by a general enlargement of the lymphatic glands of the body. It is associated with enlargement of the spleen and profound anemia. Most of the cases that came under our observation were from notoriously malarious tracts of the country.

Fatal results are generally due to the pernicious anemia and high fever that often follows this condition.

The glands of the neck, axilla, the inguinal region and mesentery are affected. Children are most susceptible to this disease but adults are not free from it. Generally the males are more affected than the females.

There are two forms of the disease. The soft and the hard. Sometimes hardness is a subsequent development. It does not consist of any new growth but simply in the enlargement of the ordinary glandular structure. It is merely a hyperplasia of the glands.

Most of the symptoms of Hodgkin's disease are due to the pressure of the enlarged glands upon the neighbouring structures. Thus when on the neck it presses upon the larynx, trachia and bronchial tubes producing pain, cough, difficult deglutition and so forth.

Brain symptoms are often developed by pressure upon the blood vessels and its nerves on the neck. Serious symptoms as convulsions, coma, insomnia may take place occasionally.

Other serious symptoms are sometimes noticeable such as evening rise of temperature or high fever, great prostration, diarrhœa, dropsical swelling and bedsores.

Treatment :—Arsenicum album has been recommended by many eminent physicians of our rank. They go so far as to say that doses should be very low so much so that physiological symptoms should appear. This is a great exaggeration. We have seen Ars. to be useful in the very high potencies and only a few doses are required for a curative purpose when well indicated.

Many symptoms of ars. are found in this disease, especially the involvement of the spleen, in pernicious anæmia and in high feverish conditions.

Dr. Lilienthel recommends *Conium* in massive doses to be useful. We have seen *Conium* in 3x or 6x potency morning and evening for sometime with occasional stoppage to be sufficient for a cure.

Natrum mur. and *Natrum sulph.* are very useful remedies. In cases of enlarged spleen and anemic conditions of the system they are highly recommended.

Natrum sulph. should be given even in dropsical swelling and œdema of lower extremities and also for diarrhœic cases.

Muriate and *iodatus* are also efficacious. The glandular swelling and inflammatory symptoms are very much reduced by these remedies. In harder variety *Merc. Iod. rub* is of excellent value. Lower potencies are better.

Arsenic Iod. is useful when the emaciation is great, fever and dropsy present and anemic symptoms prevalent.

In high fever and in recent cases and for acute glandular inflammation *Belladon.* is to be thought of.

Diet must be nourishing where there is no fever.

Plenty of fresh air and occasional sea-bathing are useful.

We have treated a considerable number of cases with great success. Some of them that were very obstinate I shall mention here.

I.

An elderly gentleman, a Hindu priest by profession, came under my treatment in the fall of 1894. He was emaciated and anemic in appearance, suffering about ten years from enlarged glands in the neck. He was treated by allopaths and kobirages with partial benefit. Two or three of them suppurated and were operated upon. This did not mend matters; on the contrary sinuses were formed and pus and serous matter was oozing out for a long time.

Had never suffered from venereal disease of any kind. No hereditary infection.

He was subject to cold and catarrh and suffered long from chronic cough. Slight feverishness in the evening with burning of hands, feet and eyes. Bowels generally constipated, hard knotty stools with great straining.

I tried several remedies, such as Calc. c. and Iod. Silicea, Graphites, Iodium both in high and low potencies, giving each for a long time and at sufficient intervals to act.

These remedies were all useful in their own way; some had stopped the evening fever, some did good in regard to constipation and tendency to catch cold but ultimate cure was effected and sinuses were completely healed up by the administration of a few doses of syphilinum. I began by giving it in the two hundredth potency, one dose a week. The finishing stroke was given by a dose of the *a. c. m.* potency kindly supplied by my friend Dr. H. C. Allen.

II.

A young girl of ten, of slender make and scrofulous constitution had several glands in the neck swollen and hard, studding the neck like a row of pearls. Some of these swellings were painful on pressure and moving about.

There was no fever, but cold and cough always present. Her appetite was poor and diarrhœa present. Her father told me that as soon as she came out of the house she began sneezing and watery fluid was coming out of the nose. In a few days cold settled in the chest and cough appeared.

She complained of burning sensation over the whole body but the temperature was always normal or a few points below it. Her father gave me to understand that she was much reduced and somewhat emaciated in general appearance. Doctors said she had tuberculosis and would soon be a victim of galloping consumption. I thought much over the matter seriously and gave a few doses of *Ars. Iod* 30 every morning. She was better in a week's time. Placebo followed. Two weeks after her father reported some new glands appeared on the right side.

Calc Iod 30 twice daily. No improvement in two weeks. Inflammation and threatened suppuration appeared in two of these glands.

Hepar s. 30 and later on 200 had very little effect.

Hecla Lava 6x half a grain morning and evening and in a couple of days inflammation subsided and fear of suppuration averted. The other glands also showed signs of improvement. To make the tale short, this remedy effected a complete cure in the course of next month, giving a few doses after long intervals. The potency was the same.

P. C. MAJUMDAR, M. D.

CHOLERA ASIATICA.

(*Continued from page 290, No. 10, Vol. XVII.*)

Capsicum.—I do not know whether capsicum has ever been used in cholera proper. It is a remedy that has frequently been found useful in dysentery. There are one or two symptoms that will generally lead to the use of this drug.

Every stool is followed by thirst and every drink by shuddering. Every chill is attended with thirst and every drink with shuddering. As the coldness of the body increases, so also does the ill-humour.

A severe drawing pain in the back. Burning and smarting sensation as from cayenne pepper, in the throat and other parts not ameliorated by heat. The burning is very characteristic of capsicum.

Carbo Vegetabilis. - The vegetable-charcoal has been one of our sheet anchors in cholera. It has been instrumental in saving many a human life from the very jaws of death.

In cases of difficulty of breathing with a desire to be constantly fanned and particularly if it is associated with marked tympanitis, Carbo acts like a charm. I have myself verified it in practice time and again and can vouchsafe for its efficacy.

Although opinion is divided as to its usefulness among British practitioners, we can all of us here in India echo the opinion of our late illustrious colleague Dr. Mohendra Lal Sircar.

*Such authorities as Teste, Russell, Hempell and Hughes altogether question the usefulness of this drug in the collapse of cholera. Dr. Hughes after his pronouncement on the drug in his Pharmacodynamics and in his Principles and

Practice of Homeopathy says, "carbo vegetabilis was much used by Tessier to meet the later prostration of cholera and Dr. Sircar seems to think it of value."

Dr. Joslin mentions the following as indications for Carbo. Veg. and also cites a few cases: "If the patient is blue, cold and pulseless *i.e.* collapsed, Carbo. Veg. two or three globules. If the collapse is complete, the principal remedies are Cuprum, Arsenicum, Carbo. Veg. and Secale.

Here is a case reported by Dr Joslin—A girl, aged $7\frac{1}{2}$, was attacked about $4\frac{1}{2}$ P. M. thursday, Aug. 16th 1849. The disease commenced with diarrhœa and vomiting. Was seen before the collapse was complete. Then took one drop doses of Camphor and then some doses of Camphor 3rd and then was treated with Veratrum 30. She was in collapse within two or three hours from the commencement of the disease. Pulseless; voice nearly lost; tongue, face and limbs cold; cramps; urine suppressed. In the evening she was put under Carbo. Veg 30 and Cuprum met. 30 alternately every hour.

Friday, the second day, in the morning;—after remaining in this state of collapse for about twelve hours, entirely pulseless, reaction came on in the morning under the continued use of Carbo. Veg 30 and Cuprum 30 given as above mentioned. The pulse and voice were restored, and the tongue and most of the skin acquired a temperature nearly normal.

Saturday, the third day,—A stool nearly normal except as to consistence which was that of mush *i.e.* semi fluid. Reaction about complete. Temperature normal, the recovery was also complete."

We think Carbo. veg. alone would have effected the cure in this case.

Dr. Nash in his excellent brochure, *Leaders in Therapeutics*, gives a picture of Carbo. Veg. that we so often come

across in cholera. "Vital forces exhausted, cold surface especially from knees down to feet, lies motionless as if dead, breath cold, pulse intermittent, thirsty, cold sweat on limbs. This is truly a separate condition. Then add to these symptoms, blood stagnates in the capillaries causing blueness, coldness and echymoses; patient is so weak that he cannot breathe without being fanned constantly. Gasps, Fan me ! fan me ! Carbo. Veg. has saved such cases." The most marked and valuable place for this remedy is in its power to relieve complaints from excessive flatulence in the stomach. Stomach feels full and tense on account of flatulence, so much so that it causes distressed and painful breathing which compels the patient to call for constant fanning. In such cases Carbo veg. acts very promptly.

Hippocratic face, very pale, grayish yellow, greenish, cold with cold sweat; after hemorrhage, from loss of vital fluids. Patients crave things that make them sick; old toppers, crave whisky or brandy, want clothing loose around the abdomen.

Weak digestion, simplest food disagrees; excessive accumulation of gas in the stomach and intestines lying down. Eructations gave temporary relief. Deficient capillary circulation causes blueness of skin, and coldness of extremities, vital powers nearly exhausted, desire to be constantly fanned.—H. C. Allen.

In the collapse stage of cholera as already stated, with copious cold sweat, cold breath, cold tongue, voice lost, Carbo veg will be your "sheet anchor" many a time, particularly if there is tympanitis. I have found it useful even in cases where Opium and Ant. tart. failed. We sometimes use Carbo veg like Sulphur in cases where these well-selected remedies fail to act.

In the hemorrhagic variety of cholera we frequently find Carbo veg indicated, particularly where Aconite fails to pro-

duce any good effect. Sometimes we have sudden collapse without stool. Nose, cheeks, and finger tips icy cold, lips bluish, cold breath and tongue. *Respiration weak and laboured Hiccough at every motion.* This last symptom you will frequently come across in the later stages of cholera and is one that is very difficult to relieve. Light drinks should be recommended in such cases. Sometimes they persist with great tenacity, but we need not be anxious on that account. My late grandfather Dr. Behari Lal Bhaduri used to say :— "I have never lost a case from hiccough. When he said this he backed it with an experience of hundreds of cases. This has been our experience also. Hiccough is a complication that seldom occurs in cases that have been under homeopathic treatment from the beginning. These cases generally come from allopathic hands and Nux is our great ally in such cases ; failing which we try Carbo veg.

In its prostration Carbo veg is very similar to China. We generally use the 30th potency. Sometimes the 200th also does very good work.

Dr. Salzer in his lectures mentions the following :—I cannot tell you who first hinted, that Carbo veg should be used in cholera, in the collapse stage; but it is a very happy hit indeed.

Both Baehr and Kafka speak very highly in its favour, and I may as well add my own small share to the statements of others. Carbo Vegetabilis, says Dr. Baehr has done us not infrequently good service at a period of the cholera process, where most of us are at a loss how to lay hold upon an effective remedial agent. It is indicated at the asphyctic stage when vomiting and purging have ceased, and when there are no cramps any more, the patient lying moreover extremely prostrated—corpse-like. Carbo often follows well after Arsenic; more frequently, however, it suits cases void of reactionary signs from the very beginning.

It is worthwhile noticing that the effects of carbonetted hydrogen closely resemble the asphyctic stage of cholera. In Allen's Encyclopedia, Article Carbonicum Hydrogenisatum. we read actually that it has produced in one man exposed to the gas ricewater stools for sometime after the attack.

Carbolic Acid.

This is a remedy that we have never used in cholera yet, but still it has some very marked characteristics that may call for it in cholera.

"Profound prostration, collapse, surface pale and bathed in cold sweat. (Camph, Carbo Veg, Verat alb.)

In Malignant diseases. Vomiting of drunkards, in pregnancy, of dark olive green fluid (Pyrogen—H. C. Allen.)

Stools :—Ricewater, offensive like rotten eggs, Bilious, watery, involuntary, thin black stools (in collapse)—Bell.

In hydrocephalus with offensive stools; Carbolic Acid will be very useful at times.

In an exhaustive diarrhœa with very offensive stools when Carbo Veg, and Psorinum do not help give Carbolic Acid"—C. Pearson.

Chamomilla.

This remedy though seldom called for in true Asiatic cholera, is still found to be very useful in diarrhœa and cholera infantum in which it is invaluable. We have time and again used this drug with great benefit and I think we should not be in too much hurry to charge it for another, if the symptoms will indicate it. If we find the least improvement we should persist with it.

If we notice some improvement this will itself bring about a perfect cure in many a case in spite of the experience of some authors to the contrary. During dentition children very frequently suffer from these derangements and Chamomilla with Calcareia stands at the head of the list for such troubles.

Peevish, irritable, oversensitive to pain, driven to despair (coffee), cannot return a civil answer—H. C. Allen.

Child becomes exceedingly fretful and whiny and wishes to be carried constantly. Piteous moaning.

"One cheek red and the other pale." I have myself verified this symptom of chamomilla.

"Novices often fail with Chamomilla. It is not adapted to every case of diarrhoea during dentition. The mental symptoms are of chief importance (Comp. Cina) but the desire to be carried alone is not decisive. If however the other symptoms correspond, particularly of the stool, this symptom will make the choice more certain.—J. B. Bell.

Stools—Yellow, watery or greenish and slimy, and hot. Sometimes chopped up white and yellow mucus. At times very offensive like rotten eggs. Convulsions during dentition. Hydrocephalus in the later stages of cholera infantum (Calc. Phos). Convulsion in children from morning, after a fit of anger in the mother.

"Dentition with diarrhoea of green stools smelling like rotten eggs."

"Hot and thirsty with the pains, also fainting."

"Gastralgia in coffee-drinkers, constrictive pain or as if a stone were in the stomach."

"Wind*colic, abdomen distended like a drum; wind passes in small quantities without relief."

"Stools green, watery, corroding (Sulph) like stirred eggs."

"Stools hot, smelling like rotten eggs."—E. B. Nash.

As regards potency we generally use the 12th, but sometime the 200th acts very well.

Cicuta Virosa.

We are sometimes called upon to use this drug in the later stages of the disease, when convulsions and other brain symptoms appear. Here are some of the symptoms. Convul-

sions violent with fearful distortions of limbs, in fact of the whole body with loss of consciousness.

Brain diseases from suppressed eruptions. Desire to eat chalk, charcoal and such other indigestible things (Alumina, Psorinum.)

"In cholera :—Loud-sounding, dangerous hiccough. Vomiting alternates with violent tonic spasms of the pectoral muscles. Congestion of blood to the brain or chest after vomiting ceases.

Violent jerking backwards of the head. Staring or up-turned eyes. Heavy breathing. Sopor Convulsion :—J. B. Bell.

The stools are not very characteristic. They are thin and frequent and generally expelled with a great deal of force all at once. Every morning there is aggravation with distended abdomen.

As regards the potency, 6th, 30th or even the 200th has been used with excellent results.

Cina.

Though properly speaking Cina is a remedy that is generally indicated in worm affections, still I have used Cina in cholera with excellent results, particularly when the symptoms were rather erratic and unexplainable. Our distinguished colleague Dr. D. N. Ray once told me that Cina has saved many a patient for him. Now it has become my practice to give Cina if the symptoms indicate it whether there are any worms or not. • .

Face is pale ; sickly white and there is bluish appearance around the mouth ; sickly with dark rings under the eyes. One cheek red and the other pale (Chamomilla), .

Ravenous appetite, wants to eat all the time. There is a burning sensation in the stomach. (Sulph.)

Worm affection of children.

Ascarides (Marum Verum.)

The urine is inclined to be white and turbid. The stools are bilious, white or greenish. Round worms are passed with the stools. The white turbid urine is a clear indication for Cina.

We generally use the 200th. The 30th potency is also sometimes used. Here is a case :—

A female child, about 19 years old, had an attack of cholera. She had homeopathic treatment almost from the beginning. In spite of our best efforts the child was getting from bad to worse.

Ultimately we despaired of her life. There was no history of helminthiasis. The child was drowsy and was boring at the nose occasionally. Occasionally she would scream out in her sleep. She passed no urine for 3 days. After several remedies we gave Apis and expected much from it but to no effect.

Ultimately I gave a dose of Cina 200 and in about 3 or 4 hours' time the child passed a quantity of turbid urine and began improving gradually. I continued Placebo after that. She is a hale and hearty girl to-day. I might mention that there was an epidemic raging at the time, and we lost another case in this very house.

Cinchona.

Like Carbo Veg. China is one of our best remedies in the profound prostration that frequently result from an attack of cholera.

Our late illustrious colleague Dr. Mahendra Lal Sircar said :—"The best remedy that we know of in this condition, is China. It is singular that when we were ignorant of the Hahnemannian system, we used to derive the greatest benefit from Quinine. Hahnemann said "Debility and other complaints after loss of blood or other fluids particularly by nursing or salivation, bleeding, cupping &c. To this Dr. Nasir has added, profuse suppurations and long continued diarrhoea and, I will go a step further and say after an attack of cholera.

For this state of things, we have a "friend indeed" in China.

The mental condition of the China patient is also peculiar. He is indifferent and apathetic, frequently of a gloomy and foreboding nature and sometimes taciturn.

The face looks pale and haggard, almost hippocratic.

Excessive flatulence both in the upper and the lower part of the abdomen. Aggravated by eating. Colic worse after eating and better by bending double (Colocynth.)

One hand icy cold, the other warm (Digitalis, Ipecac, Puls).—H. C. Allen.

The stools are generally yellow, watery, undigested, profuse, frothy, involuntary, putrid and painless.

The tongue is coated white or yellow.

Pulse is generally hard and rapid, sometimes extremely feeble.

Great weakness, particularly with the painless stools. Profuse night-sweat. Rapid exhaustion and emaciation.

After a long lasting attack of cholera infantum, child becomes drowsy, pupils dilated, rapid and superficial breathing ; Chin, nose and tips of the ears cold (impending hydrocephalus)—J. B. Bell.

When properly selected China frequently complete the cure. In threatened hydrocephalus however it is often necessary to follow it up with Calc. Phos. The 30th acts very well. Colchicum.

Of late this remedy has been very extensively used in cholera and in some instances with excellent results. In Colchicum the abdomen is not so puffed as in Carbo. Veg., neither does it lie flat with the spine as in Verat. Alb. Although there is a bursting feeling with the flatulence of Colchicum still it is nothing like that of Carbo Veg.

The stools are generally watery with mucus shreds floating

in them. The abdominal discharges contain white and shreddy particles in large quantities. White mucus. Scrapings of the intestines (Carbolic Acid.)

Aversion to food. The smell of cooking food is objectionable. Bad effects of night watching. Urine suppressed, or in drops with white sediment.

Nausea and vomiting. The desire to vomit becomes much less if the patient remains perfectly still. There is heat in the mouth with thirst. Great thirst, even burning, unquenchable. Increased secretion of saliva, often very profuse. The saliva causes nausea and often inclination to vomit, when swallowing it. Burning in the stomach with icy coldness, also in the abdomen.

Colchicum stands next to Podophyllum in painless cholera morbus. It differs chiefly in the stools being smaller and less gushing ; in the time of aggravation, and the presence of the nausea and vomiting.—J. B. Bell.

Bloody stools with deathly nausea from cooking food—Lilienthal.

Colchicum is indicated in the hemorrhagic variety of cholera if there is great nausea and where Aconite and Ipecac fail.

Cornus Circinata.

This remedy though seldom used, is a very valuable one when indicated. Its leading symptom is a distended condition of the stomach and abdomen relieved after passing stool, but the abdomen swells up again in no time. We have verified this symptom in practice time and again.

The stools are watery, greenish and mucous. There is frequent passage of offensive flatus. Jaundice is a very common symptom (Chelid.)

(*To be continued.*)

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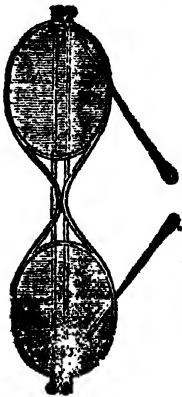
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THE INDIAN HOMEOPATHIC REVIEW.

A Monthly Journal of Homeopathy and
Collateral Sciences.

[Vol. XVII.] DECEMBER 15, 1908. [No. 12.]

APPENDICITIS.

So much has been said about this disease and so many valuable lives lost from it that it is but right that we should look at the cause, course, remedy and result of the disease from a most rational and conscientious stand-point with an unbiased mind. We make no exaggeration when we say that we have cured innumerable cases of this malady with the remedial agent. Some of these cases had been to hospital and had been declared to have been undoubted cases of appendicitis and were recommended to undergo the usual operation. Some of these patients have kept well for years inspite of the declaration of the physicians that they will have relapses. Some, of course, have had relapses, but these again have been cured very quickly under homeopathic treatment.

Now so much has been said in favor of the operation, that something ought to be said about this matter. Surgeons have declared that the appendix is an useless organ and the sooner it is removed the better. But we doubt the merit of this statement very seriously. We think it is a very useful appen-

dage to the intestines. The theory of foreign matter getting into the appendix is fast losing ground. To me, it seems that the theory, that an inflamed appendix cannot get well without the operation, is also equally absurd. Of course there may be cases where operative measures are absolutely necessary. But the number of these cases is very small indeed. The following lines seem very reasonable to us.

"We find the following quoted in an exchange: "The ailment commonly known as appendicitis is another disease resulting from indigestion, which, in turn, is most frequently caused by overeating. Appendicitis is rarely anything more than acute constipation, which has gone so far as to produce inflammation of the bowels. The popular belief that it originates from a seed lodged in the appendix is as sheer nonsense as is the even more frequent explanation of some men that the appendix is a useless rudimentary organ. The latest and most scientific discoveries have proved that the appendix is a very useful organ, serving to lubricate the intestinal organs, and hence has been termed 'the little oil can of the colon.'"

Another writer affirms the habitual use of cathartic "pills" and other artificial means of moving the bowels to be the cause. But why does one habitually overeat, another find the bowels habitually constipated, and so on, and so on? What is it in any human being that causes abnormal conditions known as ill health, conditions that are not traceable to some known cause? It is with this, with the thing that causes appendicitis in one, tuberculosis, scrofula, catarrhal, or what not constitutional taint in another, that which we choose to term chronic disease, Homeopathy deals. It goes to the root of the matter, eradicates that and physical sanity, scarred it may be, but sanity results. The deeper science of medicine will be found in Hahnemann's last and greatest

work, *The Chronic Diseases*, and the man who combines it with his symptomatology is among the really great healers of his time.

It is the rule that babies—children—raised on homeopathic treatment are on the average healthier than those whose ills are ministered to by other methods. The reason is that the properly selected, dynamically prepared, homeopathic remedies not only cure the temporary ills but eradicate the constitutional taints that later in life develop into the graver diseases.”

—*Homeopathic Envoy.*

GRANATUM AND CINA.

We shall speak of Granatum and a little of Cina together. Both are very sensitive, have canine hunger and passes ascarides and lumbricides and the former passes tapeworm also enveloped in mucus (of course from large doses). Both have diarrhoea and pain about the naval region. As to urinary organs the former has inflammation and swelling of the urethra, and discharges mucus from it, a kind of blennorrhœa, but the latter has frequent urging to urinate with passage of much urine the whole day and the urine becomes immediately turbid, the former has yellow leucorrhœa and latter has hæmorrhage from the uterus. As to respiratory organs both have dyspnœa but as for cough and expectoration it cannot rival Cina which has paroxysms of violent coughs from time to time and gagging cough in the morning after rising. As regarding neck and back Granatum has rheumatic pains in the nape of the neck and Cina has paralytic sensation in it. Granatum has emaciation, with excessive appetite, here it rivals abrotanum and natrum muriaticum. Both of them have weeping, complains in sleep and also waterbrash.

NILAMBER HUL.

THE COMMUNICABILITY OF TUBERCULOSIS.—Dr. Walter Sands Mills, physician to the Tuberculosis Infirmary of the Metropolitan Hospital, New York, has had perhaps as much practical experience with the disease as any one in the country. The following is taken from a paper by him published in *The Hahnemannian Monthly*. Dr. Mills is a homeopathic physician :

Regarding the origin and transmissibility of tuberculosis little is known, notwithstanding the mass of literature that has been written on the subject during the past few years. Personally, I believe too much emphasis has been laid on the communicability of tuberculosis. The occasional cases are transmitted, one to another, is undoubtedly true, but it is extremely difficult of proof. If two members of the same household are taken ill with tuberculosis, one after the other, or if two persons working side by side in a factory are taken ill with tuberculosis, one after the other, by what right can it be maintained that one was infected by the other ? Why is it not just as correct to say that both were subject to the same general conditions and so, naturally, became ill of the same disease ?

An overwhelming fact against the easy communicability of tuberculosis is this : It is estimated that one-seventh of the world's population dies of tuberculosis. By what possible combination of circumstances could the other six-sevenths of us escape if the danger of infection were so great as some would have us believe ? Escape would be impossible ! The world would have been depopulated ages ago.

But there is some fame, some good offices and much power latent in spreading among the people the notion that tuberculosis is a "communicable disease." Those who "fight" it are not in fear of it.

CHOLERA ASIATICA.

(*Continued from page 352, No. 11, Vol. XVII.*)

I had a case of a young baby about 10 months old suffering from diarrhœa. The characteristic flatulence and the jaundice were very quickly relieved by Cornus.

Croton Tiglium.

This is a remedy that has been long used in cholera and choleraic diarrhœa and has a very good reputation in checking these loose evacuations.

Copious watery diarrhœa coming out in a great gush. The bowels are moved with a jerk "coming out like a shot" (Gambogia) as soon as the patient eats or drinks ; the stools are grayish, yellow and watery.

Constant urging to stool followed by sudden evacuation which is shot out of the rectum (Gamb, Gratiola, Podop, Thuja)—H. C. Allen.

What Dr. Nash says about Croton Tig. is so eminently true that we cannot help but quote it here. "When the allopaths, in any case, where they considered an operation of the bowels imperative, had exhausted all other resources, Croton Tig. was their "biggest gun for the last broad side." In other words, this is a most violent cathartic.

Now if Similia &c. is not true Croton Tig. ought utterly to fail to cure diarrhoea, but it is true, and notwithstanding this remedy has proved its truth over and over again, the allopaths deny and reject homœopathy.

As in Podop. and Aloe, Croton Tig cures its kind and no other. Its guiding symptoms are : First yellow watery stool ; second, sudden expulsion, coming out like a shot, all at once."

Now these lines are so true that we have felt justified in quoting them in full. In disease there can be no royal road

to a cure. The saying what is one man's meat is another's poison, is as true to-day as it was the day it was uttered. Still our inclination to simplify matters in this world, has lead us to most disastrous ways in the field of medicine. While our friends of the other school are making such wonderful strides in the collateral branches of medicine as for instance, in bacteriology, pathology, surgery, hygiene &c. yet they are hopelessly at sea when they come to the study of medicine proper. We find most eminent physicians prescribing patent medicines the ingredients of which are not known to them. Is it to be wondered then that the market is being infested with these patent drugs all over the world. Now if we can rely on these for the various diseases to which we are subject then what is the use of having qualified physicians.

Stools yellow, watery, frequent, brownish or undigested. Coming out like a shot. Generally worse after drinking and is better after sleep. Vomiting immediately after drinking. Violent vomiting of injeſta ; of yellowish white frothy fluids. Burning and pressure in the stomach. Colic and writhing around the umbilicus. The lips are dry and packed. Great pain, and weakness, coldness of the body.

The stools of Croton are very characteristic. The yellow watery motion, coming out like a shot is always a leading symptom.

Cuprum Metallicum.

Copper has long been used in disorders of the bowels. It was known to the ancients. In India it is customary among people to tie a copper coin around the waist of children. It is said to ward off such diseases as cholera &c.

Cuprum is one of the few remedies recommended by Hahnemann for the treatment of cholera. What was prophesied then, has been very well verified in practice. I

quote here in full what Hahnemann said about the treatment of cholera.

"When the cholera appears, it usually comes on in the commencement i. e. in the first stage (with tonic spasmodic character) ; the strength of the patient suddenly sinks, he cannot stand upright, his expression is altered, the eyes sunk in, the face bluish and icy cold, as also the hands, with coldness of the rest of the body ; hopeless discouragement and anxiety with dread of suffocation, is visible in his look, half stupified and insensible, he moans or cries in a hollow, hoarse tone of voice, without making any distinct complaints, except when asked ; burning in the stomach and gullet and cramp pain in the calves and other muscles ; on touching the precordial region, he cries out ; he has no thirst, no sickness, no vomiting or purging.

In the first stage Camphor gives rapid relief, but the patient's friends must themselves employ it, as this stage soon ends either in death or in the second stage, which is more difficult to be cured and not with camphor. In the first stage accordingly the patient must get as often as possible (at least every five minutes) a drop of spirit of camphor (made with one ounce of camphor to twelve of alcohol, on a lump of sugar or in a spoonful of water. Some spirit of Camphor must be taken in the hollow of the hand and rubbed into the skin of the arms, legs, and chest of the patient ; he may also get a clyster of half a pint of warm water, mingled with two full teaspoonfuls of Camphor, and from time to time some Camphor may be allowed to evaporate on a hot iron, so that if the mouth be closed by trismus, and he can swallow nothing, he may draw in enough of Camphor vapour with his breath.

The quicker all this is done at the first onset of the disease, the more rapidly and certainly will the patient re-

cover ; often in a couple of hours warmth, consciousness, rest and sleep return and he is saved.

If this period of the commencement of the disease so favorable to recovery and speedy cure by the above indicated employment of Camphor, has been neglected, then things look worse ; then Camphor is no longer serviceable. There are more over cases of cholera, specially in northern regions, where this first stage, with its tonic spasmodic character, is hardly observable, and the disease passes instantly into the second stage of clonic spasmodic character ; frequent evacuation of watery fluid, mixed with whitish, yellowish or reddish flakes and along with insatiable thirst, and loud rumbling in the belly, violent vomiting of large quantities of the same fluid, with increased agitation, groaning and yawning, icy coldness of the whole body, even of the tongue, and marbled blue appearance of the arms, hands and face, with fixed sunken eyes, diminution of all the senses, slow pulse, exceedingly painful cramps in the calves, and spasms of the limbs. In such cases the administration of a drop of Camphor spirit every five minutes must only be continued so long as *decided* benefit is observable (which with a remedy of such rapid action as camphor manifests itself within a quarter of an hour). If in such cases decided benefit is not soon perceived, then no time must be lost in administering the remedy for the second stage.

The patient is to get one or two globules of the finest preparation of *copper* (prepared fine metallic copper in the mode described in the second part of my work on chronic diseases) thus Cuprum 0,00x moistened with water and introduced into his mouth every hour or every half hour, until the vomiting and purging diminish and warmth and rest are restored. But nothing else at all must be given beside ; no other medicine, no herb tea, no baths, no blisters, no fumiga-

tion, no venesection, &c, otherwise the remedy will be of no avail. Similar good effects result from the administration of as small a portion of white hellebore (*Veratrum Album* 0.00x) but the preparation of copper is much to be preferred, and is more serviceable, and sometimes a single dose is sufficient, which is allowed to act without a second being given, as long as the patient's state goes on improving.

The wishes of the patient are to be indulged in only in moderation. Sometimes when aid is delayed many hours or other and improper remedies have been administered, the patient falls into a sort of typhoid state with delirium. In this case, *Bryonia* 00x alternately with *Rhustox* 00x proves of eminent service.”—

Here are some of the leading symptoms of the drug :—

Cholera morbus or asiatic cholera, with cramps in abdomen and calves of legs.

Cramps in the extremities ; palms, soles, calves with great weariness of limbs.

Clonic spasm in the fingers and toes. Spasms and cramps ; constant protrusion and retraction of the tongue (Lach.)

When drinking the fluid descends with a gurgling sound (*Ars. Thuja.*) Compare *Ars.* and *Veratrum* in cholera and cholera morbus ; *Ipecac* the vegetable analogue.—
H. C. Allen.

The stools are watery and frequent. There is generally great restlessness with tossing about and constant uneasiness. The eyes are sunken with blue rings around them. Excessive thirst ; Tip of the tongue is cold.

Deathly nausea ; violent vomiting, with violent colic and cramps. Violent pains in stomach.

Deathly spasm and constriction beneath the sternum. Violent spasms with piercing screams. Spasms of the throat

preventing speech. Dyspnœa so intense that he cannot bear a handkerchief before the face.

Urine scanty and suppressed. Soft, slow pulse, weak and small. Intense coldness and blueness of the surface with cold sweat. The violent cramps and spasms of Cuprum will distinguish it from Camphor, Verat., and Arg. Nitr. These cramps particularly affect the flexors, the muscles often drawing up into visible knots.—J. B. Bell.

Cuprum as we all notice from the symptoms, is a great spasmodic remedy. In cramps it is perhaps the best remedy. These cramps may be localized or general. The more violent the cramps, the more difficult is the case and the more easily and promptly will it yield to Cuprum if timely administered. We have used this remedy most extensively and have derived admirable results. I echo Hahnemann's opinion even to-day, as I have always found Cuprum yielding better results than Veratrum. Now there are different preparations of Cuprum that we have used and to some of which we are peculiarly partial, because they have yielded most excellent results in the hands of myself, my father Dr. P. C. Majumdar and my late grand father Dr. Behari La Bhaduri.

Cuprum Arsenicosum stands at the head of the list. Its action is most prompt and it has been the saviour of many a life in my hands. The late Dr. E. M. Hale first introduced this remedy.

It received quite an extensive use in the hands of late Dr. B. L. Bhaduri in cholera.

Dr. Hale records his experience thus :—"I first used in some severe cases of cholera which occurred in 1867 and 1876. These cases were marked by the usual intestinal disorder to which was added severe and painful cramps in the abdomen and extremities. The alternation of Arsenicum and Cuprum

did not prove as satisfactory as I expected, but the use of cupric arsenite in the 6x trituration in water for children, and dry on the tongue in adults generally acted promptly. I can recommend it in cholera infantum, spasmodic and neuralgic pain in the bowels accompanied by screams, and cramps in the fingers and toes attended with great debility and threatened collapse. I have also used it with good effects in chorea dependent on a profound affection of the nervous centres, and presenting the wellknown characteristic symptoms of cuprum united to the dyscresia which always indicates Arsenic.

(To be continued.)

INDIRECT TRAUMATISM AS AN OCCASIONAL CAUSE OF CEREBRAL APOPLEXY.

BY JOHN E. WILSON, M. D.

NEW YORK CITY.

Cerebral apoplexy is such a common occurrence in the practice of all physicians that any of us would feel competent, with small time for consideration, to state the ordinary varieties and their causes. Cases sometimes occur, however, in which none of the usual conditions have preceded the attack, and where the etiological factor is left largely in the realm of theory, since the necessity of determining the extra etiology is too slight to force us into any very elaborate investigation. On the other hand, cases do occur where large interests depend upon such a decision, and in a recent medico-legal case, the paucity of exact knowledge of the effects of indirect traumatism was very strongly impressed upon my mind. The status of accepted medical opinion at the present time seems to be this. Cerebral apoplexy may be produced by direct injuries to the cranium which have such a degree of penetration that they lacerate or rupture the walls of the arteries, or veins of the meninges, of the dura,

especially often. If the force is such that the contour of the cranium is suddenly changed, the walls of the vessels upon the side of the injury, or upon the opposite side of the cranium ("contre coup") may be stretched to such a degree that they will be torn, and an effusion of blood will take place. Straining at stool or some other variety of effort producing a sudden increase of blood pressure has also proved sufficient to cause rupture in many authenticated cases. The cerebral arteries to the cortex, and the deep branches of the middle cerebral which are distributed to the capsulo-ganglionic area have been known to rupture during strong muscular exertion, stress of the emotions or even from that slight increase of intra-cranial pressure caused by a partial blocking of the return circulation through the jugulars from a faulty position of the head during sleep. In all these cases, save only when there has been direct laceration of the arteries, or tearing by sudden compression of the skull, it has been held that a high degree of vascular degeneration was an absolutely necessary pre-requisite. Moreover, it has been everywhere taught, and universally believed, that such a degenerative condition cannot be safely inferred, unless it has been possible to demonstrate a considerable degree of arterial tension for a somewhat-prolonged period, or the presence of a pronounced renal disease, or some acute condition competent to produce acute degenerative changes in the vessel walls, or such a degree of atheroma that it could be discovered in the temporals, radials or dorsalis pedis.

One further reservation should be made. While the peripheral arteries may be expected to reveal to the expert clinician the condition of the cerebral vessels, perhaps the too strenuous pace of modern life of the present day has been the factor which qualified what was formerly a warranted hypothesis. It must be acknowledged that a life of extreme mental tension, without necessarily the adjuvants of alcohol; or other dissipation, has proved competent in many cases to degenerate the cerebral vessels, without a concomitant degradation of the peripheral ones. Yet this condition cannot obtain without the production of signal symptoms, insomnia, irritability, losses of memory, muscular weakness, and paresthesias, which are capable of

interpretation. We should then be in accord with general belief, if we should hold that a apoplexy could not be inaugurated in a person with a normal vascular apparatus, unless there had been a direct and considerable traumatism to the cranium, or unless the person was possessed of a vascular system so degenerated that objective or subjective signs of the condition would be discoverable by the physician. The variations of the initial symptomatology of apoplexies is also appreciated, and the causes are well known. We know that the rupture of a group, is immediately followed by a considerable degree of unconsciousness and muscular paralysis. We are also fully aware that there is the possibility of an apoplexy in two stages. If rupture occurs of an artery of the meninges, the patient may exhibit initially only a slight loss of consciousness, or transient confusion of mind, with a slight and localized paralysis, or muscular weakness. Then we may note a complete absence of all paralytic or apoplectic symptoms for a period of hours upon to a day or two, when complete unconsciousness supervenes, with a general paralysis of a permanent character. This results from the fact that such ruptures are at first minute, and the brain endures with complacency a considerable degree of pressure and vascular disturbance if it is slow in its evolution. The later coma and paralysis result from the continuance of the pressure, and its progressive increase as the mass of extravasated blood grows larger and larger. We appreciate also that a capsulo-ganglionic rupture may be so small that the tissues are able to retain, after an instant, the pressure of such a small column of blood, but that the tissues soon lose their resiliency from the softening ensuing upon the accident, and give way in a day or two, precipitating a more massive hemorrhage. An initial hemorrhage of small amount may also occur in the centrum semi-ovale, close to the ventricle, and breaking through, after a few days, set up a much more severe chain of symptoms. In all these apoplexies in two stages, as they are termed, we are impressed by the fact that the so called latent period is marked by headache, or some other indication that the brain is functioning under unusual conditions. It is also a matter of common knowledge that the rupture of any

cerebral artery, except from evident external violence, or possibly in conditions of marked atheroma, is preceded by an aneurismal dilatation at the point of hemorrhage and that such a condition is an indisputable pre-requisite. Autopsies by the hundred have shown that persons succumbing to cerebral apoplexies have possessed cerebral arteries which were studded by such dilatations, each one of which was the possible site of a hemorrhage. The case which was called to my attention, and which I thought might be of some interest to the profession, had a course and result which ran counter to the conclusions naturally flowing from the generally held opinions which I have recounted. The question was this : Could we reasonably ascribe an apoplexy, occurring as I shall narrate, to an injury of the kind suffered by my client ?

A coffee broker, fortysix years of age, of good habits and weighing about one hundred and twenty-five pounds, was standing and holding to two straps in a Subway car, when it was struck by another train from the rear. The shock was so violent that he was thrown over the cross-seats, and struck on the floor on his back, and with a bruising of one elbow. He picked himself up, and sat in a seat until the passengers were released at twenty third street, a half hour afterwards. He was not injured on the head, was able to converse, and on leaving the station walked up to the Hotel Manhattan, as the surface cars were packed, even upon the roofs. He ate dinner with a friend, took him for a ride in the Subway, and went to Boston on the midnight train. He did business the next day but suffered from an increasing headache, which drove him to take a drink later in the day, and to spending the night at Young's Hotel because his wife strenuously objected to liquor. He slept, went out to his suburban home for breakfast, and then returned to business, still with a headache. He finished the day, took a dinner, which he retained, went to a theatre to divert himself from his pain, and then took the train for New York. On the train his pain was so severe that he could not sleep, and thinking that drawing blood from his head might relieve him, he struck himself several hard blows on the nose, with no result. On arriving in New York he breakfasted at the Greek Restaurant and

then went to the Manhattan. While talking with the room-clerk he became confused and weak and would have fallen to the floor if a chair had not been quickly provided. After a few moments he arose and walked to the elevated station, to blocks away, and went into a car. He found himself sliding down on the seat, and knew no more until he recovered consciousness in a day or two, in the wards of the Flower Hospital. He recovered after a time, and went out a hemiplegic. On examination, several months after the accident, he showed no evidence of renal or cardio-vascular disease and exhibited a blood pressure of 130 millimetres. This man then had suffered a severe physical and mental shock without direct injury to his head, and had developed within eighteen hours a severe and continuous headache, which increased in violence, and within sixty hours a cerebral apoplexy. The questions to be decided seem to me to be two. Is it possible to strain the cerebral arteries of a man in previous good health by the increase in vascular tension resulting from a sudden effort at readjustment of position, and emotional shock that the wall will give way, and produce an aneurism?

Secondly, is any person in a position to affirm that the inception of an aneurism, and its final thinning out to the point of rupture must necessarily consume more or less than sixty hours? Six learned gentlemen from the medical profession of this city denied the first possibility, and the second question was not presented, and the case was decided against the plaintiff. Thus the matter was ended, so far as any financial remedy for the sufferer was concerned, but within three weeks the two following cases were related to me by Dr. Egbert Le Fevere, of this city.

In the early part of 1908, a gentleman, about fifty-one years of age, attempted to enter his automobile while his attention was distracted by a newspaper in his hand. The automobile started before he had actually entered it, and he was thrown violently to the ground, striking upon his back, his head coming in contact with the ground only sufficiently to partially crush the brim of his Derby hat. There was no injury to the scalp or cranium, and he was not too much injured to continue his trip, and attend to the business of

the day, nor to prevent his attending a dinner that same night at the house of Dr. Le Fevre. He told the doctor of the fall, and said that he had suffered a very severe "shaking up." A short time previously the doctor had taken his blood-pressure and had found it to be 150 millimetres, and had examined into the state of his kidneys and had found them sound. Three days elapsed without symptoms, and then he was suddenly stricken with apoplexy. In the meantime he had not been subjected to any strain of a mental or physical character.

A short time ago, a gentleman of leisure, about forty-eight years of age, was heavily thrown on attempting to mount a restive horse. He struck on the earth on his back, suffering no head injury. He caught the horse, mounted and subdued it, and then walked to the house. He told his wife that he had suffered a severe fall. He went to see his physician, as he was accustomed to keep a very sharp watch of his condition if he felt any derangement of any kind. He was a sound man, and at the time revealed nothing, except a general muscular lameness, and certainly no cerebral symptoms. No symptoms followed, and no strain of any kind was endured. On the evening of the second day, while sitting reading in his library, he found that his paper was slipping from his grasp, and soon became unconscious, and is now a hemiplegic. In the light of commonly accepted teaching what are we to infer as to the course of the apoplexy in these two cases, and what was lacking to make it probable that my client became a hemiplegic from a very similar accident?

North American Journal of Homeopathy—November, 1908.

THE DIFFERENT PREPARATION OF NATRUMS GENERALLY USED IN HOMEOPATHIC MATERIA MEDICA.

BY J. N. MAJUMDAR M. D.

A paper in the Homeopathic Review by C. M. Boger M.D. induced me to bring up this subject before you for our to-night's deliberation.

Laying aside the question of medicine we find salt a common essential factor in our every day life. Our foodstuffs taste insipid without the addition of salt, in fact salt plays a very important part in the elements of our economy. Plasma or the liquid part of blood contains about 8.5 of salts in 1000 parts of plasma. The introduction of large portions of saline substances prevents blood from coagulating. All our food such as meat, fish, milk, &c. contains a certain amount of salt.

Now in considering the different preparations, we take up Natrum Muriaticum first as it is the sodium chloride or the common salt of our every day use. Without going into the detailed symptomatology I will only mention such factors as have been of particular use to us here in India. Natrum Mur, as you all know, is one of our sheet anchors in malaria. But Natrum like Quinine is no panacea for malaria and it has distinct characteristics. My revered grandfather the late Dr. Behari Lal Bhaduri at one time said that Burdwan malaria called for Natrum while that of Nadia called for Eupatorium, Nux and the like remedies. Having studied the cases of a large number of patients who hailed from Burdwan, he invariably found that Natrum covered their symptoms and cured them beautifully. In intermittents, where Natrum is called for, the paroxysms come on about 10 or 11 A. M. And these are generally badly treated cases of chronic fever, particularly where it has been suppressed by large doses of quinine. Fever blisters at the corners of the mouth is a good symptom of Natrum. There is generally a very bad headache with it. An abnormally enlarged spleen finds a good remedy in Natrum ; while as a rule it cannot be repeated without an intercurrent in chronic cases ; in the enlarged spleen it requires frequent and continuous repetition.

Great emaciation, losing flesh while living well is another good symptom of Natrum.

I remember the case of a young boy, Fakir Chandra Dass, whose life was saved by the administration of Natrum. He came to me in a pale cachectic condition with remittent fever and an enormously swollen and enlarged spleen. In about six months' time he was thoroughly restored to health.

Natrum Sulph.

Now I will say a few words about the sulphate of sodium. As you all know, it is the grand remedy for the hydrogenoid constitution of Grauvogl. He is affected by every change of the weather. Damp weather is death to him. For the effects of the chronic gonorrhœal poison it is like Thuja an excellent thing. This drug I have generally used in the higher potencies, never going below the 30th. Aggravation from music is another great peculiarity with this remedy. It has a diarrhœa that is very similar to that of Sulphur, and is often called for in scrofulous cases. It comes on early in the morning after getting up and moving about, for the stool is associated with a great deal of flatus. It is in this connection that I have used it very frequently and with excellent results. Sometimes there is an afternoon aggravation with it.

Natrum Sulph is valuable in brain diseases when there is a history of trauma to the head.

Natrum Carb.

The carbonate of soda is another remedy that is not so frequently used as it should be.

Aggravation from mental exertion is a great characteristic of this drug. The least exertion brings on a bad headache. The heat of the sun also causes headache like Glonoine and Lachesis.

Weakness of the ankles from childhood finds a goop remedy in Natrum Carb. Natrum Carb is also useful in dyspepsia. Milk always disagrees and brings on diarrhœa.

In catarrhs extending to the posterior nares Natr. Carb. is used with good advantage.

Natrum Phos.

I do not know much about this drug, never having used it in practice, but Dr. Boger recommends it in various troubles, particularly in catarrhal conditions such as leucorrhœa, ophthalmia and the like troubles. *

KING EDWARD AND BAPTISIA.

The London Homeopathic World reports the death of Dr. Blaydes, who had attained the allotted span of life. It relates the fact that in the year 1871 when the present king Edward was the Prince of Wales, he was suffering from a dangerous state, for Dr. Blaydes succeeded in procuring a trial of Baptisia as a remedy with very prompt and satisfactory results. Of course, the homeopathic remedy would not have been given an opportunity if the case had not been dangerously beyond the allopaths; yet though its action was "prompt and satisfactory," not a scintillation of recognition was accorded to Homeopathy. This, and thousands of similar cases, show a curious trait in human nature. Let the allopathic, or, if you prefer it, the "regular" physicians, get up a new treatment, and it sweeps the world like wild fire, until every one can see it is worse than failure, but when Homeopathy cures a disease, as in the case cited, dead silence is the world's response. One would think that physicians who had witnessed the wonder working of a remedy, homeopathic to a case, would become enthusiastic and thoroughly study the law on which it operates, but they do not. As a professional body they have worked themselves into the curious state of mind when

* Read at the Calcutta Homeopathic Society.

the very worst reproach, and the thing most to be dreaded by them, is to be accused of even surreptitiously practising Homeopathy. These men are but human beings, and this peculiar state of mind shows that there are some very curious in the human make up.

—*Homeopathic Envoy.*

SUPPRESSED DISEASES.

Hahnemann's last and really most important work "The Chronic Diseases" is not accepted by many conscientious and honest homeopathic physicians, yet really in it, if we may so express ourselves, is to be found the very heart and soul of Homeopathy. The only argument advanced against the book by homeopathic physicians is that Hahnemann asserts that in suppressed itch lies the cause of chronic disease; that he did not know of the existence of the itch mite, which is the cause of the itch, and therefore his whole theory of the chronic diseases wrong. This objection would be unanswerable if it were not for the fact that Hahnemann taught nothing of the sort.

We shall not go into the question here further than to state that on broad lines the teaching of "The Chronic Diseases" is that in suppressed diseases lies the cause of all the human physical ills, which he broadly embraced under the term chronic diseases. This of course is a very general statement and is open to many quibbles and exceptions, but it is broadly true.

The old idea, the allopathic, is to suppress the symptoms of disease wherever it is manifested. Thus skin diseases which are but outlets of internal malady, are "cured," i. e., suppressed by external means; fever is suppressed by anti-

pyretics, pain is suppressed by pain-lulling drugs ; malaria is suppressed by large doses of quinine ; venereal diseases by injections ; rheumatism by salicylic acid, and so on.

There is no cure in these procedures. These "cures" by suppression lead to many forms of ill health that the honest skilful allopath cannot control because he does not know that they are of his own creation.

Let us take an illustrative case, one that is not selected because it is remarkable or unusual, but because it is at hand in an exchange on our desk at the moment of writing. The journal is *The Critique*, a Denver, bold., homœopathic journal and the writer of it is Dr. G. E. Dienst, of Aurora, Ill.

The patient, a carpenter, opened his tale of woe :

"Doctor, I don't understand why I should be so weak and emaciated, for, until last spring, I was always strong and vigorous."

Now began a tale of the case elicited by questions and volunteered by the sick man.

Briefly, the ill health started with stomach troubles diagnosed as ulcers, and followed for five months, with everything that scientific medicine and its bacteriological adjuncts and many appliances knew about, and at last the health gone, he was dismissed with the prognosis that death was inevitable and near.

This was all that could be learned. The many symptoms, very painful and depressing, need not, for our purpose, be related here.

The patient was now asked the question as to his condition before his illness began. Oh, he was always well and very strong.

Never cured of any disease of any sort ? Yes, his feet used to sweat most profusely, and smell from them was so vile that he had to wash them on every occasion and

change his socks at least once a day. But he was "cured" of that trouble by such and such means, and his feet were all right now.

And the other illness, the one now threatening speedy death, set in about the time the feet were "cured" ? Yes, very soon after.

Well, there you have a typical case illustrating the point we wish to make. How the foot sweat originated no one knows. It was a chronic disease, most likely hereditary, and the result of suppressed disease of some sort. So long as it was allowed to find vent in the foul foot sweat the man suffered no other ill, but when it was "cured" *i.e.*, suppressed, it in turn developed some other disease which would have resulted in speedy death, unless, indeed, it had found some other vent outwardly.

In this case Silicia in potency was given, and the man began to mend, but as he approached his normal strength and appetite, the old foot sweat again appeared. There, gentle reader, you have the outlines for quite a "problem" story. Also, mayhap, a chronic disease in the making for offspring conceived in such conditions suffer from chronic diseases "the sins of the father."

In Homeopathy, in chronic disease, Homeopathy alone can a cure be found. Many have been restored to physical sanity by this Homeopathy, and many more may be if men will see its truth and enlarge its borders for the science of Homeopathy is but in its infancy.

—*Homeopathic Envoy.*

Clinical Cases.

I.

May 18, 1850. I had a night call to the hotel to see W. Burke, age 36 years. He was suffering from his third severe attack of pleurisy. In the previous attacks, he had been bled twice, blistered, and given large doses of calomel, followed by antimonial preparations. Obtaining my patient's consent, I resolved to give him frequent doses of Aconite and Bryonia, promising that if he was not better in an hour I would bleed him. The hour was passed in great anxiety on my part. I was testing small doses in a desperate case. At the end of the hour, I sheathed the lance, banished the blister plaster and dispensed with the calomel. In his previous attacks, my patient had been two weeks in making his recovery.

May 21st. Three days after the inception of his attack he walked into the hotel office, and said, 'Hurrah for the little pills.' The boarders and the hotel proprietor insisted that the patient should have more heroic treatment, but I stood guard over him for thirty-six hours and allowed no one in the room but the nurse. It was a triumph for Aconite and Bryonia..

"Smart" Americans laugh at John Chinaman for his tenacity at holding on to old customs, but what better were these boarders? The whiteman's superstitions do not essentially differ from those of other races, and are given up just as reluctantly. To him they are not superstitions but the results of "accumulated experience", but so are Johns—with a longer line of "experience." To him, the whiteman, "desperate cases require desperate remedies" and you cannot beat it out of him. In time he may be educated out of the idea that a

desperate disease assault requires a desperate drug assault, but it will be slow work.

II.

Why not do likewise—Dr. Hare, a standard author, in the allopathic school, writes in his book, *Practical Therapeutics* : Homeopathy depends on more than one reason for its existence. If infinitesimal doses are given, the patient is satisfied that he is receiving medicine, and nature often produces her most rapid cures when left alone.” The results of pure homeopathic treatment are so far superior to those following allopathic treatment that it is a matter of surprise that Dr. Hare and his followers and readers do not resort to the placebo treatment themselves. Why don't they ? Why load a patient with drugs that would make a well man ill and keep him ill for months and years, or until the “treatment” was discontinued, if the “make believe medicine” will give quick relief ? That question could lead to very curious answers. The other day we stumbled over a case of a lady who had been ill, nearly all the time in bed, for over six months. The “regular” doctor during that time had been giving her drugs strong enough and in quantities sufficient to lay out a longshoreman ; indeed it is doubtful if there is a human being living to-day who could have retained even a semblance of health if forced to suffer the “treatment” this patient has received. The curious thing about it is that she stood it. This is but one case out of countless thousands. We braggarts of this 20th century laugh at the “superstitions” of our “forefathers” and at the hold “priesthoods” had over them, and here we are meekly and trustfully taking “medicine” that would lay a prize-fighter by the hills to “cure” us. We should not bray too loud over the foolish superstitions of the past, for they have merely changed their dress and are dominant as ever.

III

Medicine as she is practised—In the beautiful month of June 1908, an allopathic medical journal opened its leading editorial with the following paragraph, which is not without interest to parents.

"Any medical man who closely follows the current literature through season after season, cannot fail to be impressed with the fact that the majority of practitioners expend the greatest part of their energy in treatment of diarrhoeal troubles in infants in sterilization of the food and in administration of intestinal antiseptics. The mortality tables are not flattering to either our skill, nor yet to this plan of treatment. Its results that count in medicine are as elsewhere. If this plan has not yielded the benefits which theory declares it should, it is time for the man who practises at the bedside of actual patients to make inquiry, and to look about him for a better way."

IV.

Money well spent—In Australia, recently, at Melbourne, a doctor was summoned to appear before the court to show cause why he had not vaccinated his child. His defence was that while he had no desire to do anything unlawful, he was convinced that vaccination would be very harmful to the child, and he therefore refused to permit the hurtful operation. Dr. Cole, who had charge of the state's side of the case remarked. "So doctors differ." The defendant was fined 45 shillings. If this ends the case and the child may henceforth escape the physical effects that follow the operation, it is money well spent. The fact, though, of a government fining a parent for refusing to harm his own child is curious.

V.

Vacation time.—Nearly every one will soon be off, on vacation. If you are wise, you will put in your "grip" say half

a dozen homeopathic medicines and one of those little free "indexes" that you can get free at any homeopathic pharmacy. Or, better still, a compact "181 remedy" case—you will find it "mighty handy."

—*Medical Advance.*

THE COMMON SENSE OF HOMŒOPATHY.

Dr. Sharp, in his Tracts, writing of the case with which the effectiveness of Homeopathy may be demonstrated, says —

"The confirmation of the fact we are now considering is open to the observation of any medical practitioner every day, and that without reading books on Homeopathy. He knows well that Ipecacuanha causes sickness (nausea); when he is requested to prescribe for a child who is suffering from sickness and vomiting from a disordered stomach, let him give a few small doses of this drug. He will thus at once test both the principle and the dose ; and unless there is something more about the case than I have supposed, he will find his patient very quickly cured. He knows that Mercury acts upon the salivary glands ; let him give it in a case of mumps, and he will find his patient recover more rapidly than he has been accustomed to observe. He knows that corrosive sublimate produces dysentery ; let him give this substance in an ordinary case of dysentery ; and the disease will most probably yield more speedily than if he had adopted any other mode of treatment. He knows that white hellebore (*Veratrum alb.*) is a most powerful purgative ; let him give it in a purging, if chilliness be an accompanying symptom, and he will perhaps be surprised at the beneficial result. He knows that Arsenic and Phosphorus produce inflamma-

tion of the stomach and bowels ; let him have courage to try either of these poisons and he will probably see severe sufferings subside under the influence of the small dose. He knows that Cantharides acts upon the bladder, and readily causes strangury ; let him give it in a similar case, and his patient will most likely need no other remedy. He knows Nuxvomica acts very much upon the spinal marrow, and upon the organs dependent upon the spinal nerves, and those of the great sympathetic ; let him try it in various affections of these organs and he will often succeed in curing his patient. He knows that lead (Plumbum) often causes paralysis of the extremities ; let him give it in cases resembling those of poisoning by lead, but which have arisen from some other cause, and he may find a very difficult and troublesome affection considerably relieved.

"If the practitioner is acquainted with the literature of his profession he will know that copper (Cuprum) and Stramonium produce muscular spasm ; Ipecacuanha, symptoms resembling asthma ; Cocculus, paroxysms of vertigo with nausea ; Antimony, derangement of the stomach and chest ; Sulphur and Arsenic, affections of the skin. From the same sources he will know the injurious effects of other substances, when acting as poisons upon persons previously in health.

So far as I have yet learned, every medical man who has thus examined the subject, with candor and perseverance, has seen and acknowledged the confirmation in his own hands of the truth of the statement. Nothing remains but for others to pursue a similar course ; but, if men will not look through Galileo's telescope, it is not surprising if they do not see Jupiter's moons."

When Galileo perfected his telescope he turned it on the planet Jupiter and discovered its moons. He published the

fact and the scientific world arose in arms and denounced him. He invited one of his assailants to look through his telescope, but the indignant and learned professor absolutely refused to do so. The sceptics concerning Homeopathy to-day are in the same boat with the old professor. The few who look see, the others will not. The outline given by Dr. Sharp is sufficient for any doctor or others to test the homeopathic practice provided the potentized form of the drug is employed.

—*Homeopathic Envoy.*

ORNITHOGALUM UMBELLATUM :

A NOTE ON PROVINGS.

By JOHN H. CLARKE, M. D.

Dr. P. W. Shedd, of New York, is an ardent student of the *Materia Medica*, and is filled with a laudable desire to make this homeopathic implementum a less unwieldy instrument than it is at present. But I hardly think he has sufficiently estimated the magnitude of the task he has undertaken, and I am quite certain that his method is defective. He is attempting to purge the *Materia Medica* by proving negatives.

In the *Cleveland Medical and Surgical Reporter* of February 1907, is one of a series of articles from his pen in which he relates provings of several remedies, and among them one of *ornithogalum umbellatum*. Dr. Shedd brings his onslaught on the remedy by spelling "*ornithogalum*" wrongly; he gives it two 'i's' instead of one. This is a little inconsistent with the usual American habit of dropping an 'i' wherever possible, and also with his adopted habit of shortening the *Materia Medica*. Dr. Shedd betrays at once his negative bias by calling in question Dr. Cooper's cure of cancer of the stomach in the case of the man Murrell, who is known and was

seen by a number of homeopaths besides Dr. Cooper, and who is well at the present day. Dr. Shedd somewhat impertinently styles this case an "apparent cure." All I can say on this point is that I saw the patient and that the cure is so "apparent" that there is no disproving it. Moreover, the steps in this cure were so marked and definite that the process could be easily followed. As the readers of this journal may not all be possessed of my "Dictionary of Materia Medica", I will quote the case from that work. Here it is :—In his "Cancer and Cancer Symptoms" Cooper has published the case of George M., aged 40, who was suffering from cancer of the stomach and was operated on in the Cancer Hospital. The operation was abandoned on account of the numerous adhesions, and because it was impossible to remove all the diseased tissues. Cooper saw him first on July 22, 1898, and found him writhing in agony on his bed, unable to keep anything long in his stomach ; > by warm foods, < by cold drinks.

Pains < at night. They began in stomach, spreading to hands and between shoulders, as if an iron brick were being forced through the stomach and chest. There was a visible bulging between attachment of diaphragm extending to scrobiculus cordis. Tongue red, coated towards back, bowels confined, sometimes diarrhoea.

Patient's father died of gastric ulcer, aged 73. On Saturday, July 23, at 6 P.M., Cooper gave Ornith. mother one dose. This was followed by great pains, the patient felt almost frantic at 3 A. M., and again at 1 P. M. when the bowels acted. At 3 A. M. he began taking Carb. V. 3x. every three hours. This was discontinued on July 26, as the patient thought it increased the pains, which now extended over the whole body. On the 27th a frothy substance began to come up, giving great relief. Cooper considered this as evidence that the Ornith had touched the disease, but had been restricted in its action by the Carb. v. A second dose of Ornith mother was therefore sent and taken in the evening of July 28. Almost immediately after the patient began bringing up a black jelly-like substance, with great relief to pain and general improvement. From this time the progress was steady. On August 29, the patient, in his report, said

he was keeping fairly well, though at times having great pain in lower part of the stomach. And he noted these important additional symptoms :—"Great difficulty in going to sleep owing to a creepy sensation in limbs. Also on sitting, legs and feet go all of a heap, cannot keep still, cannot read without walking about. Feet also ache and swell." Dose repeated, September 9. On the 18th he reports : "Sleep much better. Pain in left leg and foot, but not nearly so bad. Slight pains at the bottom of the stomach and a little more swelling" Cooper saw him on September 30, and learned that after the last dose feet and ankles began to swell more, but gradually got better. On September 23 right leg felt as if bruised, and is now painful and angry-looking, swollen, and leaves spots on pressure. When eating feels as if the food chokes in the stomach; some flatus, bowels regular. Another dose was given, and the effect confirmed Cooper's view that 'the swelling resulted from the high pressure put upon the emunctories owing to the setting free of poison in the system.' 'In a few days,' says Cooper, 'he came to me in great fright, and pulling up his trousers, showed me the terrible condition, as he thought, of his legs. They were swollen, and great red streaks and patches could be seen coursing down the limbs. Believing that these were due to the rapid elimination of the cancer poison, I rather astonished him by insisting on his walking away without any medicine whatever. This patient soon became perfectly well. I saw him myself soon after and examined him thoroughly, and could find no indication of any disease whatever except the scar of the operation. He was alive and well in July, 1901."

Dr. Shedd induced eleven medical men to prove *Ornithogalum* with high and low potencies ; and he concludes from the fact that there was a great paucity of symptoms and that therefore the curative power of *Ornithogalum* is imaginary. But I should like to remind him of another homeopathic remedy, *Allium Cepa*, the common onion, which is being "proved" every day of the week by millions of persons without producing any symptoms at all (unless we may call the oniony odour of the breath a symptom), and yet *Allium Cepa* is a most potent and reliable remedy all the same.

But according to Dr. Shedd's rule *Allium Cepa* should be "eliminated" with *Ornithogalum* "from the list of medical substances."

Dr. Cooper pointed out a fact which Dr. Shedd does not appear to have taken sufficient note of, that it is quite possible to be too healthy to prove a drug. A certain degree of instability to sensitiveness is necessary in order to obtain many of the finer symptoms. Hahnemann noticed the same thing, and he found that remedies developed many new symptoms in patients who were being cured by them.

But let us see what results Dr. Shedd obtained. They were mostly negative ones. But they were not all negative.

Prover No. 2 made a valiant proving. He took at 4 P. M. 40 drops of the tincture ; 7 P. M., 50 drops ; 10 A. M., 80 drops ; 1 P. M., 90 drops ; 4 P. M., 95 drops ; 7 P. M., 100 drops ; 10 P. M., 105 drops ; 7 A. M., 110 drops ; 10 A. M., 120 drops ; 6 A. M., 130 drops.

After this he reported :—"Have felt no ill effects, unless it has been to disturb the bowels a little. Some signs of looseness. A little external pile has been somewhat sore." As the prover had had symptoms before, he was not certain that the drug had had anything to do with it.

Prover No. 4 took 5 drops at night and before breakfast, for two weeks. The result of this was that a common cold developed during the fortnight. Considering the drug's relation to *Allium Cepa*, this was probably a drug effect.

Prover No 5 took *Ornith. umb.* 200, 5 drops, on retiring and before breakfast for two weeks. This prover is said to be very subject to drug action, yet he had only one symptom that he could speak positively about. But this is a rather good one. A heavy drowsiness on walking, < after customary afternoon siesta, some nausea, which did not interfere with appetite ; perhaps > after eating. .

Prover No. 6. taking the 3x night and morning, "caught a cold while taking the drug." It got better whilst the drug was being taken in increased doses.

Prover No. 8 began by taking a drop of the tincture and added a drop every two hours. Result :—In spite of a rather normal habit and a diet favourable to health, and considerable activity, for the last three days constipation has been rather marked. Simple atony, lack of symptoms. This prover had had the same symptoms before.

Prover No. 9 took 60 drops daily and slight eructations and a very mild heart-burn. With larger doses nothing happened.

These positive results, slight as they are, are not without their significance.

With all due deference to Dr. Shedd, his negative results prove nothing and afford no warranty for the exclusion of Ornith-umb. from the *Materia Medica*.

I do not think his provings were particularly well carried out. His patients, for one thing, repeated their doses much too frequently. We are all taking strong poisons every day for our lives—tobacco, coffee, tea, alcohol—but no symptoms appear because the doses are repeated. Another mistake made is to imagine that no symptom is valid unless it knocks a man down, so to speak. Now the art of reading a drug's action by proving is a very delicate one. It needs an unbiassed mind, a quick sense, and an accurate judgment. But these are of no use unless there is at the same time a certain degree of sensitiveness to the drug's action. Constantine Hering to whom we owe *Lachesis* and *Apis* used to say that after he had taken the drug he was proving, he listened intently for the first one of its actions. Dr. Shedd's provers had no idea of the necessity for such alertness. They accepted nothing which did not force itself on their notice, and then with so much reserve and so grudgingly that they seem loath to give the drug the credit of it.

(*To be continued .*)

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